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UNITED STATES GOVERNMENT

# Memorandum

TO : Mr. Callahan

DATE: 5-23-68

FROM : J. B. Adams

SUBJECT: SA DONALD C. MORRELL  
Section Chief - Correspondence and Tours Section  
Crime Records Division  
Veteran

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Bishop \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

## PERMANENT BRIEF

Entered on Duty  
Reported to Field  
Present Grade and Salary  
Last Salary Change  
Age  
Place of Birth  
Marital Status  
Education

Member of Bar

Language Ability  
Offices of Preference since 1-66  
1968 Annual Performance Rating  
Firearms Ability  
Outstanding Endorsers  
Relatives in Bureau

### Offices of Assignment:

11-2-47	assigned
6-10-48	transferred
10-2-50	Resident Agent
2-25-51	transferred
3-16-53	transferred
3-14-60	transferred

8-18-47  
11-2-47  
GS-16 - \$23,079  
10-11-67 - Grade Promotion  
49 - Born 6-13-18  
Brooklyn, New York  
Married - 2 Children  
Bachelor of Arts Degree  
Bachelor of Laws Degree  
District of Columbia Bar  
U. S. Court of Appeals Bar  
U. S. Supreme Court Bar  
Spanish - Unsatisfactory  
Seat of Government  
EXCELLENT  
Qualified  
None  
Out-of-Service Relative:  
Son, D. Clark Morrell, Jr.

Charlotte  
Atlanta  
Valdosta, Georgia  
Washington Field  
Administrative Division  
Crime Records Division

FDH:ejs (1)

*memo Mr. Tolson  
6/26/68  
J.B. Adams*



Donald C. Morrell  
8-17-67

This employee entered on duty on 8/18/47 as a Special Agent in Grade CAF-10, \$4225.80 per annum. At the conclusion of his training period, Mr. H. H. Clegg stated he made a very good personal appearance, he had considerable self-confidence, a good personality, and made a very favorable impression. He had a very good attitude towards his work and had the ability to make contacts readily and easily. This man would develop rapidly in the field.

RECORD IN GRADE CAF-10, \$4525.80 On 11/2/47 he was assigned to the Charlotte Office.

On 1/10/48 SAC Thornton rated him GOOD and stated his rough drafts had come in well prepared and in good order and he had prospects for further and fuller development.

By letter dated 1/24/48 he requested that consideration be given to him, when he was again transferred, to some city where there was an accredited night law school, such as Washington Field, Chicago, or New York, inasmuch as he believed he would be of more value to the Bureau if he were a graduate of law school. By letter dated 2/9/48 he was advised that it could not be assured that he would be transferred in the immediate future which would permit him to carry out his plans; however, his wishes had been made a matter of record for whatever consideration was possible in connection with any future assignments contemplated for him.

On 3/31/48 SAC Thornton rated him GOOD and said he was considered one of the best dictators among the new agents who had been assigned to the Charlotte Office. His reports, memoranda, and letters were satisfactory, the volume of his work had been average, and required less than average supervision. He had indicated good possibilities for further development.

On 6/8/48 SAC Brown rated him VERY GOOD and said he had acquired considerable experience as a result of working on his own initiative and that experience had reflected itself in a noted increase in his self-confidence and all-round abilities. His work required less than average supervision and his progress had been very satisfactory.

During the Inspection of the Charlotte Office in June, 1948, the Inspector (Fred H. McIntire) said he was enthusiastic about his work and seemed to have a good knowledge of Bureau work. He appeared to be above average in intelligence and should develop into a very good employee.

On 6/10/48 he was transferred to the Atlanta Office.

On 7/11/48 he received a Basic Salary increase to \$4855.80 per annum and on 8/22/48 he received a Uniform Promotion to \$4981.20 per annum in Grade CAF-10.

On 12/3/48 SAC Foltz rated him EXCELLENT and said he organized and initiated his work and investigations well and his reports required a minimum of supervision. It was believed that with additional experience he could be used in a supervisory or administrative capacity.

On 2/9/49 SAC Bills rated him EXCELLENT and stated this Agent had impressed him as one of the best new agents. His work from an administrative standpoint had required a minimum of supervision. His whole attitude was one of desiring to improve himself and he had exhibited above average appreciation of the problems in the operation of a supervisory desk.

During an Inspection of the Atlanta Office in February, 1949, Inspector Gurnea said his progress appeared to be above average.

On 3/20/49 he was reallocated to Grade CAF-11, \$5232 per annum.

RECORD IN GRADE CAF-11, \$5232 On 3/31/49 SAC Bills rated him VERY GOOD and said he had developed in an above average manner, he had been outstanding in the development and supervision of his work. He had shown real ability in supervising his own work and seeing that his cases were properly handled. He had received supervisory training in that office.

On 10/12/49 SAC Bills rated him VERY GOOD and said he had above average poise for his experience and in the general handling of his work he had shown the ability to administer and organize his work in order to accomplish the maximum results.

On 10/30/49 he received a Basic Salary increase to \$5400 per annum in Grade GS-11.

By letter dated 11/22/49 he was commended for the splendid work he performed in connection with the complicated Mail Fraud case involving [REDACTED]

[REDACTED] This was a particularly complicated case and raised a number of legal questions which gave the Court considerable difficulty. This Agent took over the case after it had already become voluminous while assigned to another Agent.

He attended In-Service Training from 3/20/50 to 3/31/50.

On 3/31/50 SAC Bills rated him EXCELLENT and said he was an excellent dictator, he had handled testimony in Federal Court, and his reports, memoranda, and letters required only minimum supervision. The SAC would not hesitate to use him on dangerous assignments or physical surveillances, and he was available for special and general assignment. He had been assigned to general criminal work for seasoning, and had closed a far above average number of criminal cases and handled a large volume of applicant work. His delinquency had been far below the office average. During the past year he had received a few routing slips and memoranda in connection with delinquencies and errors of form. During a self-inspection it was noted in one applicant case that an additional source could have been checked to determine the applicant's physical condition.

By letter dated 4/25/50 he was awarded the Possible Club Medal for the perfect score which he fired on 3/25/50.

On 8/21/50 SAC Bills rated him EXCELLENT and said his reports and memoranda required an absolute minimum of supervision, he made very good contacts, and he was available for special and general assignment.

On 9/17/50 he received a Uniform Promotion to \$5600 per annum in Grade GS-11.

On 10/2/50 he was designated Resident Agent at Valdosta, Georgia.

His overtime for October, 1950 was 2 hours 10 minutes; November, 2 hours 31 minutes; and December, 1 hour 56 minutes.

Memorandum dated 1/13/51 reflected that he had purchased a home at Valdosta, Georgia.

During an Inspection of the Atlanta Office in January, 1951, Inspector (ASAC H. V. Van Pelt) said he seemed mentally alert and confident, and to have above average ability to make contacts.

On 2/20/51 SAC Bills rated him SATISFACTORY and said he did a very fine job of selling himself to the police and to business contacts in the Valdosta area. It was necessary to utilize him on an emergency basis as a relief supervisor and he had demonstrated real ability to handle administrative responsibility. He also showed ability in getting work out of other agents. The SAC believed he had a real future as an administrator in the Bureau.

On 2/25/51 he was transferred to the Washington Field Office.

On 3/31/51 SAC Stein rated him SATISFACTORY and said he initiated his investigations very well, his reports appeared to be well prepared and he was a very good dictator. He was able to participate in raids and dangerous assignments. With more experience he should be able to handle the more complicated investigations. He was available for special and general assignment. He was rated in the Upper third of his grade. On 4/1/51 he was reallocated to Grade GS-12, \$6400 per annum.

RECORD IN GRADE GS-12, \$6400 On 7/8/51 he received a Basic Salary increase to \$7040 per annum in Grade GS-12.

On 3/31/52 SAC Hood rated him SATISFACTORY and stated he had been assigned Loyalty of Government Employee cases and he had indicated a decided interest in his assignment and was a willing worker. He produced a good volume of work, there was no hesitancy in assigning any complicated or important type of Loyalty of Government Employees cases to him because experience had shown it would be well handled. The results he had obtained warranted the belief that he could handle the more complicated investigations. He took pride in submitting good reports and toward that end organized his dictation carefully and had shown an excellence in dictating ability. He was available for special and general assignment.

His overtime for the month of March, 1952 was 1 hour 7 minutes.

On 4/29/52 his SAC submitted his name for consideration for development on a long range basis.

He attended In-Service Training from 6/23 to 7/3/52.

On 7/1/52 the SAC was advised that this agent was now a qualified Inspector's Aide.

On 7/29/52 Bureau authority was granted to utilize the services of this agent as a Relief Supervisor, it being noted that he was to be used in this capacity on one of the Applicant Squads in that office, and only in the absence of a regularly approved full-time supervisor.

His daily average overtime for August, 1952 was 1 hour 18 minutes.

On 9/28/52 he received a Uniform Promotion to \$7240 per annum in GS-12.

By memorandum dated 2/11/53 it was recommended and approved that Agent Morrell be authorized to make contacts at the White House in conducting applicant investigations of White House employees.

In February, 1953, his SAC submitted his name in connection with Personnel Advancement and added that he showed good promise as a supervisor, and with more experience he should be able to assume more administrative responsibilities.

On 3-16-53 he was transferred to the Administrative Division, and on his transfer report, also submitted as his 1953 annual report, SAC Hood rated him SATISFACTORY and said he had a wide-awake attitude. The problems involved in his work were readily understood and appreciated. His production was above average. His investigations were thorough, and his reports were excellent. Because he used good judgment and had so ably conducted his investigations, he had been assigned the more complicated and important cases. He could handle the more complicated investigations.

His daily average overtime for April, 1953, was 2 hours 4 minutes with no travel overtime.

On 5-29-53 Mr. Cavanaugh rated him SATISFACTORY and stated that he had been assigned to the Administrative Summary Unit of the Personnel Section. He was a willing worker and had displayed an excellent attitude. He had performed considerable overtime. He displayed intelligence, and while he was completely unfamiliar with the policies and procedures applicable to the handling of the work in this unit, he had made a very sincere effort to familiarize himself with these matters. As was to be expected, some of his memoranda and letters had required revision from time to time. However, he showed definite improvement.

On 6-1-53 it was noted that he assisted Inspector Mason in the inspection of the Investigative Division from 4-7-53 to 5-25-53. He handled all phases

relating to Extortion and White Slave Traffic Act, Theft of Government Property, Crime on Government Reservation, Criminal Informants, Veteran Administration, Civil Suit, Federal Reserve, and Selective Service cases, and Special Inquiries for the White House. He showed forcefulness and good judgment. He was ambitious and enthusiastic and showed a good attitude, best illustrated by suggestions he made for improvements in the handling of Bureau work.

By letter dated 1-6-54 appreciation was expressed for his suggestion of 12-18-53, concerning the re-use of serial markers and the use of distinctively colored slips to indicate special file requests. He was advised that it was not felt that these suggestions should be adopted.

On 3-28-54 he was reallocated to Grade GS-13, \$8360 per annum.

On his 1954 annual report Mr. Cavanaugh rated him SATISFACTORY and stated that he rapidly assimilated the rules and applicable policies relating to his work and both the volume and quality of his production had been above average. He was intelligent, a willing worker and a most loyal Bureau employee. In recent months he had handled a number of very important and complicated administrative matters and his performance had reflected his ability to analyze facts and set them forth clearly and succinctly. He had at all times carried an equitable share of the workload. It was felt that he had the ability and disposition to continue to advance in the Bureau's service.

On 4-22-54 his name was submitted in connection with Personnel Advancement and it was reported that he had both the ability and disposition to continue to advance in the Bureau's service and with a year or two of additional experience at the Seat of Government he would be able to handle the responsibilities of an ASAC in one of the smaller divisional offices.

By memorandum dated 7-2-54 it was noted that in connection with the preparation of a large number of SAC Summaries from Friday, 6-25-54 to a deadline date of Tuesday, 6-29-54, he and other agents willingly accepted the task although it was in addition to their normal work. The project was completed successfully on the evening of 6-29-54. Mr. Morrell contributed 2 hours 40 minutes of overtime on Saturday, 6-26-54, 3 hours 37 minutes on Sunday and 2 hours 20 minutes on Monday, 6-29-54. The Director noted "It was very well handled."

His daily average overtime for February, 1955, was 2 hours 12 minutes.

On 3-13-55 he received a basic increase to \$8990 per annum in GS-13.

On 3-31-55 Mr. Cavanaugh rated him SATISFACTORY and said his duties had consisted chiefly of reviewing mail and preparing summary memoranda and correspondence in connection with disciplinary matters and other items handled in the unit. He had developed very satisfactorily during the past year and had now acquired the experience which, together with his native intelligence,

forcefulness, excellent judgment and unquestioned loyalty to the Bureau, made him a valuable asset to the Administrative Division and to the Bureau. He handled his assignments rapidly and yet accurately and thoroughly. He displayed a commendable attitude, carried an equitable share of the workload. On numerous occasions during this period he had placed the Bureau's welfare above his personal convenience. He was an excellent dictator and did a great deal of it. He had demonstrated his capability of performing well under pressure. His work during this period had been above average both as to quality and volume.

His daily average overtime for March, 1955, was 2 hours 17 minutes.

By memorandum dated 4-8-55 his name was submitted in connection with Personnel Advancement and it was stated that he was qualified for administrative advancement in the Bureau's service but it was felt he could best be used at this time in his present assignment. He was qualified at present for the position of ASAC of a small office, as well as more responsible positions at the Seat of Government.

By letter dated 4-20-55 he was COMMENDED for his exemplary services during the past months in connection with the handling of the increased workload of the Administrative Summary Unit. It was noted that he willingly and voluntarily cancelled annual leave, which had been previously approved, in order to assist in the expeditious handling of the increased volume of work.

His daily average overtime for April, 1955 was 2 hours 14 minutes.

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By letter dated 5-16-55 he was CENSURED for his improper handling of a matter involving Special Agent [redacted] of the New York Office. Specifically, it was noted that in requesting the Records Section to make an indices search on a particular reference of Special Agent [redacted] he limited his request of the Records Section to main files only. As a result he failed to determine pertinent information available in other Bureau files that necessitated the Bureau taking additional action.

His daily average overtime for May, 1955 was 2 hours 47 minutes; June, 2 hours 7 minutes; July, 2 hours 29 minutes; August, 2 hours 4 minutes, and September, 2 hours 3 minutes.

On 9-25-55 he received a uniform promotion to \$9205 per annum in GS-13.

He attended Security In-Service training from 10-24 to 11-4-55.

His daily average overtime for October, 1955 was 2 hours 30 minutes; November, 2 hours 13 minutes; December, 2 hours 10 minutes; January, 1956, 1 hour 57 minutes, and February, 2 hours 23 minutes.

Effective 2-23-56 he was reassigned to the Employees Procurement and Placement Unit of the Personnel Section.



On 3-31-56 [ ] rated him SATISFACTORY and said he was interested in administrative advancement and it was felt that he was fully qualified for such advancement. He had completed three years of service in the Administrative Division during which time his performance had been consistently above average, his attitude and loyalty to the Bureau had been clearly demonstrated and he definitely had the qualities desired of a Bureau executive. While it was felt that he was fully qualified at this time to assume the position of an Assistant Special Agent in Charge in a small or medium sized office, it was also felt that he was capable of handling a more responsible position at the Seat of Government.

His daily average overtime for March, 1956 was 2 hours 6 minutes; April, 2 hours 31 minutes and May, 2 hours 23 minutes.

By letter dated 6-5-56 he was COMMENDED for his imagination and ingenuity he displayed in the preparation of the folder pertaining to a career in the FBI.

His daily average overtime for June, 1956 was 2 hours 27 minutes.

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By letter dated 7-26-56 he was CENSURED inasmuch as it had been necessary to request the resignation of a newly appointed Special Agent, [ ] whom he interviewed and favorably recommended for Bureau employment.

His daily average overtime for July, 1956 was 2 hours 40 minutes; August, 2 hours 3 minutes; September, 2 hours 9 minutes; October, 3 hours 6 minutes; November, 2 hours 31 minutes, and December, 2 hours 3 minutes.

By letter dated 1-28-57 he was COMMENDED for his contribution in the extraordinary accomplishments realized in the recruitment of clerical employees for the Seat of Government during recent months.

His daily average overtime for January, 1957 was 2 hours 15 minutes and February, 2 hours 4 minutes.

On 3-24-57 he received a uniform promotion to \$9420 per annum in GS-13.

On 3-31-57 [ ] rated him EXCELLENT and said he had served in the Applicant Recruitment Unit and was able to handle a tremendous volume of mail with unusual accuracy and he worked extremely well under pressure. He was considered fully qualified at this time to fill the position of ASAC in a small or medium sized office. He was also considered qualified to assume greater responsibilities at the Seat of Government. He was interested in and was completely available for administrative advancement. His attitude, loyalty and capability were such that he should be able to creditably fill any administrative position for which he might be selected.

His daily average overtime for March, 1957 was 2 hours 3 minutes; April, 2 hours 5 minutes; May, 2 hours 5 minutes; June, 2 hours 6 minutes, and July, 2 hours 14 minutes.

On 8-18-57 he received his Ten-Year Service Award Key.

His daily average overtime for August, 1957 was 2 hours 7 minutes.

By letter dated 9-10-57 he was COMMEDED, through [ ] for his participation in the recruitment of clerical employees for the Seat of Government during the past three months.

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His daily average overtime for September, 1957 was 2 hours 5 minutes.

By memorandum dated 10-22-57 it was recommended and approved that he be approved on a 90-day trial assignment to the position of Unit Chief of the Applicant Recruitment Unit.

His daily average overtime for October, 1957, was 2 hours 34 minutes; and for November, 2 hours 6 minutes.

By memorandum dated 12-19-57 Mr. Edwards advised that recently a suggestion was made that a brochure be prepared for use by high school guidance counselors in connection with the Bureau applicant program. This was approved and a very excellent brochure was designed by the Exhibits Section. This agent correlated the preparation of this brochure and was responsible for the material which had been placed in it. He assisted in the various decisions regarding the makeup and design of the brochure and rendered invaluable service in the successful preparation of this brochure.

His daily average overtime for December, 1957, was 2 hours 22 minutes.

On 1-28-58 Mr. H. L. Edwards rated him EXCELLENT and stated he had fully demonstrated his ability to function in an entirely satisfactory manner as Unit Chief. He was energetic, interested and enthusiastic, was completely cooperative, had a progressive outlook and was constantly seeking ways to improve the operations and functions of the Applicant Recruiting Unit. He was completely available, had additional potential for continuing to advance and would undoubtedly be of greater value to the Bureau after he had been permitted to acquire substantial experience in his present unit chief assignment.

By memorandum dated 1-29-58 Mr. H. L. Edwards recommended that SA Morrell be promoted to Grade GS-14 in view of his satisfactory handling of the position of Unit Chief of the Applicant Recruiting Unit; however, he was passed over for such promotion at that time to be reconsidered at a later date.

His daily average overtime for January, 1958, was 2 hours 13 minutes and for February, 1958, was 2 hours 7 minutes.

By memorandum dated 2-19-58 he was COMMEDED for his excellent attitude in reporting for work on 2-18-58, notwithstanding the extremely hazardous

travel conditions in the area.

On 3-31-58 Mr. H. L. Edwards rated him EXCELLENT and stated he was intelligent, alert, possessed a quick mind, had the ability to analyze situations and think them through to a logical conclusion, possessed good judgment, and was mature in his manner and approach. He was completely familiar with the Bureau's regulations, as well as its policies and procedures, particularly as they pertained to the handling of Bureau applicant matters and other matters under his supervision. He had been serving as Unit Chief of the Applicant Recruitment Unit on trial assignment and he handled all of the functions of the unit in a far above-average manner. He displayed aggressive leadership. In addition to the above, he had been called upon during the rating period to assist in handling the work in some of the other units on a temporary basis and he had assumed these additional duties with enthusiasm and vigor. He was highly regarded by employees working under his supervision and his attitude left nothing to be desired. He was considered fully qualified at the present time to fill the position of ASAC in a small or medium-sized office, and to assume even greater responsibilities at the Seat of Government. He was interested in and was completely available for administrative advancement.

His daily average overtime for March, 1958, was 2 hours 10 minutes and April, 2 hours 39 minutes.

By memorandum dated 5-9-58 Mr. Edwards recommended that in view of the fact that SA Morrell had performed excellent services for more than the past six months in the established GS-14 vacancy of Unit Chief of the Applicant Recruitment Unit, and in addition meets an alternative eligibility standard for GS-14 by reason of more than five years of continuous supervisory service at the Seat of Government, he recommended his approval for promotion to GS-14.

On 5-18-58 he received a Grade Promotion to Grade GS-14, \$11,355 per annum. By letter dated 5-16-58 he thanked the Director for this promotion.

His daily average overtime for May was 2 hours 24 minutes; June, 2 hours 25 minutes; July, 2 hours 47 minutes; and August, 2 hours 47 minutes. b6  
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Memorandum dated 9-11-58 reflected that he was interviewed by [redacted] on 9-10-58 and [redacted] recommended that Mr. Morrell be considered for administrative advancement. [redacted] said Mr. Morrell appeared to be above average in intelligence, and he reflected vigor in his personality. It was believed he would be excellent in making Bureau public appearances and Bureau contacts. Mr. Morrell stated he was very anxious to advance as far as possible in the Bureau and he would like very much an opportunity of serving as a Special Agent in Charge. He felt he was now capable of serving as an Assistant Special Agent in Charge. He

stated he was completely available and there were no restrictions on his availability. He appeared to be completely sincere and enthusiastic in discussing his desire to advance and in stating his availability. Although Mr. Morrell had no specific suggestions at this time for improvement of the Bureau's work, he stated he had made many suggestions to streamline and effect improvement in the procedures of the section to which he is assigned in the Administrative Division. Mr. Morrell stated he was fully cognizant of the necessity of the Bureau's improving itself and he would make suggestions whenever any came to mind for the benefit of the Bureau. Mr. Morrell stated he thought one of the greatest problems facing the Bureau today was the current atmosphere in which the rights of individuals are given more emphasis by the public and the courts than the rights of the public itself. He thought any impediments placed on the Bureau in carrying out its investigative responsibilities, of course, would react against the best interests of the public at large. He stated the Bureau would necessarily have to discharge its responsibilities in as efficient a manner as possible regardless of handicaps. Mr. Morrell indicated from his conversation that he was very much concerned with the future of the Bureau and its welfare. It was believed that Mr. Morrell could adequately discharge the responsibilities of an Assistant Special Agent in Charge at this time and that he had excellent potentialities for further development.

During the inspection of the Administrative Division, in September, <sup>1958</sup>, the Inspector (SA Decker) said Mr. Morrell was on annual leave during the greater part of the time the Division was under active inspection. However, it was observed that he made a very good personal appearance and that he was obviously intelligent. Mr. Morrell commands the respect of his associates and subordinates. The functions of the unit under his supervision were handled in a satisfactory manner, indicating that he was a capable administrator.

His daily average overtime for September, 1958, was 2 hours 25 minutes; and October, 2 hours 37 minutes; and November, 2 hours 30 minutes.

His daily average overtime for December, 1958, was 2 hours 28 minutes; January, 1959, 2 hours 36 minutes.

On 2-11-59 he was designated as Unit Chief of the Applicant and Placement Unit in the Administrative Division with no change in grade or salary.

His daily average overtime for February was 2 hours 28 minutes.

On 3-31-59 Mr. Tavel rated him EXCELLENT and said he was Acting Unit Chief from 4-1-58 to 5-15-58; from 5-15-58 until 2-12-59 he was Unit Chief of the

Applicant Recruitment Unit and since 2-12-59 he had been Unit Chief of the Applicant and Placement Unit. He had responsibility for all phases of applicant recruiting, the processing of maintenance employees, the clerk-agent ratio, applicant correspondence, field eligibility lists during the entire rating period and since 2-12-59 he had also been responsible for clerical placement and transfers and housing and testing matters as Unit Chief. His over-all judgment could be classified as above average. He was well experienced in the over-all work of the section and had shown the ability to rapidly assume control and direction of the new duties added to the unit supervised by him. His over-all performance during the rating period was above average. He had the respect of his subordinates in the unit because of his over-all knowledge of the unit's operational procedures. He had assisted on a regular basis in reviewing outgoing mail in the Front Office of the Personnel Section and in such assignments had demonstrated an excellent alertness and maturity of judgment. He was interested in, available for and completely qualified for administrative advancement. His considerable experience at the Seat of Government and in the field cause him at this time to have qualities to fill the position of ASAC.

His daily average overtime for March was 2 hours 29 minutes.

In connection with a summary of SA Morrell's record for the Director's use dated 4-10-59, the Director noted "He certainly failed to grasp the proper viewpoint re utilizing stenogs in the Field who because of family reasons have to resign here." On 4-10-59 SA Morrell was advised of these comments.

His daily average overtime for April was 2 hours 9 minutes; May, 2 hours 19 minutes; June, 2 hours 14 minutes; July, 2 hours 31 minutes; August, 2 hours 14 minutes; September, 2 hours 16 minutes.

He attended Security In-Service Training from 10-5-59 to 10-16-59.

His daily average overtime for October was 2 hours 19 minutes.

On 11-15-59 he received a Uniform Promotion to \$11,595 per annum in GS-14.

His daily average overtime for November was 2 hours 13 minutes; December, 2 hours 25 minutes; January, 1960, 2 hours 17 minutes.

By letter dated 2-18-60 he was COMMENDED through C. R. Davidson for his participation in connection with the handling of a special project this past weekend.

His daily average overtime for February was 3 hours 7 minutes.

By letter of 3-8-60 he was advised of his designation as Section Chief of the Correspondence and Tours Section of the Crime Records Division, with no change in grade or salary. This is a newly-created section resulting from approval during the recent inspection of the Crime Records Division that the Crime Research Section of that division be divided into two sections because of its heavy responsibilities and tremendous flow of mail. (By memorandum dated 3-7-60 Mr. Tavel recommended and it was approved that he be designated as Section Chief of the Correspondence and Tours Section, Crime Records Division with no change in grade or salary. Mr. Tolson noted "He is not to be reallocated for at least 6 months and then only if Mr. Hoover or I approve such action." The Director concurred.)

On 3-11-60 the Director saw SA Morrell who had just been designated Section Chief of the Correspondence and Tours Section of the Crime Records Division. Mr. Morrell called to express his appreciation for the designation and the challenge which he believed his assignment offered him. The Director told Mr. Morrell that as Mr. Morrell probably knew, the Director had not been entirely satisfied with the manner in which correspondence had been coming through from the Crime Records Division nor as to the entire handling of tours, and it was his responsibility to "dig" into the section and see there was a thorough streamlining in all aspects.

On 3-31-60 Mr. DeLoach rated him EXCELLENT and said from 4-1-59 to 3-11-60 he was assigned to the Personnel Section of the Administrative Division as Chief of the Applicant and Placement Unit. In that capacity he supervised and directed the Bureau's extensive applicant recruitment program, its placement program, housing matters, and other miscellaneous functions. He possessed a detailed knowledge of all matters coming under his jurisdiction and was thoroughly versed in policy and procedural matters. He was an exceptionally valuable administrator in the Personnel Section and the unit to which he was assigned had benefited materially from his capable and judicious supervision. He was assigned to the Crime Records Division on 3-14-60 and he had performed very satisfactorily thus far. He was conscientious, eager to learn, and a "bulldog" in his tenacity to do things according to Bureau policy. He had made excellent progress thus far. He was interested in, available for and completely qualified for administrative advancement. He had all of the attributes for rapid advancement in the Bureau's service and was capable of assuming greater responsibilities either at the Seat of Government or in the field.

His daily average overtime for March was 2 hours 46 minutes; April, 2 hours 37 minutes.

On 5-14-60 Mr. DeLoach rated him EXCELLENT and stated he had performed very satisfactorily. He was conscientious, eager to learn and a "bulldog" in his tenacity to do things according to Bureau policy. He had made excellent progress thus far. He was obviously well-read, alert, intelligent and a person who inspired enthusiasm in the personnel who worked for him and around him. He had a good capacity for rapidly analyzing

problems and arriving at sound conclusions. His performance was definitely considered excellent thus far. He was interested in, available for, and qualified for administrative advancement. He had all the attributes for rapid advancement in the Bureau's service.

His daily average overtime for May, 1960, was 2 hours 47 minutes.

On 6-12-60, he was promoted to \$12,770 per annum in Grade GS-15. He expressed his appreciation for this promotion.

His daily average overtime for June, 1960, was 2 hours 46 minutes.

On 7-10-60, he received a Basic Increase to \$13,730 per annum in Grade GS-15.

By letter dated 7-21-60, he was COMMENDED for the excellent job he did as Secretary of SAMBA.

Memorandum dated 7-28-60, reflected he was designated to act in a liaison capacity with a representative of the Files and Communications Division in matters relating to the proper indexing and processing of Bureau mail.

His daily average overtime for July, 1960, was 2 hours 46 minutes; August, 2 hours 39 minutes.

By letter dated 9-30-60, he was CENSURED inasmuch as he failed to detect a number of errors in outgoing correspondence which he reviewed and approved.

His daily average overtime for September, 1960, was 2 hours 49 minutes; October, 3 hours 5 minutes; November, 2 hours 29 minutes.

By letter dated 12-12-60, he was COMMENDED for the outstanding attitude he exhibited in reporting for duty on this date despite the extremely hazardous travel conditions.

His daily average overtime for December, 1960, was 2 hours 31 minutes.

By letter dated 1-3-61, he was COMMENDED, and through him, the personnel in the Correspondence and Tours Section for the superior manner in which duties relative to the Bureau's drive against the child molester were handled.

His daily average overtime for January, 1961, was 3 hours 26 minutes; February, 3 hours 1 minute.

During an inspection of the Crime Records Division in March, 1961, Inspector [ ] stated that in view of the capability with which he had handled his present job, it was felt that he was capable of

assuming additional responsibility. His potential for advancement was rated excellent.

By letter dated 3-10-61, he was COMMENDED, and through him, the personnel in the Correspondence and Tours Section, for the excellent job done during the past week in handling a heavy increase in mail.

By letter dated 3-20-61, he was CENSURED inasmuch as a proposed reply prepared by one of his subordinates to a letter dated 3-8-61, enclosing a booklet relating to capital punishment was entirely inadequate. There had been a failure to properly analyze the incoming communication and take appropriate action concerning it.

By letter dated 3-31-61, he was CENSURED for the mishandling of correspondence to [redacted] of Paterson, New Jersey, and it was obvious that his administration of the Correspondence and Tours Section had been deficient.

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On 3-31-61, Mr. DeLoach rated him EXCELLENT and stated he made an outstanding personal appearance and had a pleasant personality. He was aggressive, loyal and completely amenable to discipline. He was very conscientious and eager to please. He had a "bulldog" tenacity to conform to proper policy. Despite the number of letters of censure received by personnel under his supervision, it was felt he had made excellent progress considering the terrific pick-up in the volume of correspondence. He was well read and was alert. He inspired enthusiasm in the personnel who work for him by setting an above-average pace himself. He had an excellent capacity for rapidly analyzing problems and arriving at sound conclusions, although his memoranda explaining deficiencies are sometimes lengthy. He was rapidly developing into a very valuable employee. He was available for general or special assignment and was interested in, available for, and qualified for administrative advancement. His qualifications for advancement were considered excellent.

His daily average overtime for March, 1961, was 3 hours 15 minutes.

By letter dated 4-10-61, he was CENSURED inasmuch as in the recent past he had failed on a number of occasions to detect errors in outgoing correspondence which he reviewed and approved. It was apparent that he had not been exercising sufficient care in this phase of his duties.

By letter dated 4-12-61, he was COMMENDED for the highly effective manner in which he discharged his responsibilities with regard to accommodating the vast numbers of people who appeared at the Bureau during Easter week to tour Bureau facilities.



His daily average overtime for April, 2 hours 12 minutes; May, 2 hours 58 minutes.

By letter dated 5-18-61 he was CENSURED inasmuch as under date of 3-31-61 he prepared an annual performance rating on a Special Agent under his supervision and he gave him an over-all rating of Excellent although he had received five letters of censure during the period covered by this report. His evaluation of the performance of this employee was clearly unjustified and his explanation for it was unacceptable.

By letter dated 6-7-61 he was CENSURED inasmuch as it had been noted that although he reviewed and approved a proposed outgoing letter dated 6-1-61 directed to [redacted] at Wallisville, Texas, he did not discover delinquencies that appeared in this item of correspondence. Material extraneous to the subject matter of the correspondence was being forwarded [redacted] through error and, in addition, one of the enclosures had not been properly identified on the file copy of the outgoing letter.

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His daily average overtime for June, 2 hours 36 minutes; July, 2 hours 46 minutes; August, 2 hours 54 minutes; September, 2 hours 31 minutes; October, 2 hours 39 minutes; November, 2 hours 41 minutes.

By letter dated 12-8-61 he was COMMENDED for his excellent performance in handling the research and necessary correspondence in connection with the banquet and presentation ceremonies for the Criss Award on 12-7-61.

On 12-10-61 he received a Uniform Promotion to \$14,055 per annum in GS-15.

His daily average overtime for December, 1961, 2 hours 52 minutes; January, 1962, 2 hours 38 minutes.

By letter dated 1-18-62 APPRECIATION was expressed to him for his suggestion concerning a proposed airtel form for use in handling certain correspondence. He was advised his proposal was ADOPTED.

His daily average overtime for February, 1962, 2 hours 22 minutes; March, 2 hours 39 minutes.

On 3-31-62 Assistant Director C. D. DeLoach rated him EXCELLENT and stated he made an outstanding personal appearance and his personality was above average. He was aggressive, loyal and amenable to discipline. He continued to make progress in his job as Section Chief and had been

particularly alert as to the suggestion of ideas for streamlining purposes. He demanded and received complete respect and absolute good discipline from his subordinates. His memoranda explaining deficiencies were at first somewhat lengthy, however, recently had been more analytical and objective. He was rapidly developing into a very excellent administrator and Section Chief. He was interested in, available for, and considered to have excellent qualifications for administrative advancement.

His daily average overtime for April, 1962, 2 hours 38 minutes; May, 2 hours 34 minutes.

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During an inspection of the Crime Records Division in May, 1962, the Inspector [redacted] stated that under his leadership the morale in the Correspondence and Tours Section was excellent. This section handled a large volume of correspondence expeditiously and the employees work under extreme pressure. He was interested in, completely available, and had excellent potential for administrative advancement.

His daily average overtime for June, 1962, 2 hours 40 minutes; July, 2 hours 13 minutes; August, 2 hours 30 minutes; September, 2 hours 28 minutes; October, 2 hours 24 minutes.

On 10-14-62 he received a Basic Salary Increase to \$15,045 per annum in GS-15.

His daily average overtime for November, 1962, 2 hours 30 minutes; December, 2 hours 23 minutes;

On 12-9-62 he received a Within-Grade Increase to \$15,525 per annum in GS-15.

By letter dated 1-21-63 he was CENSURED inasmuch as on several occasions errors were detected in correspondence which he approved.

His daily average overtime for January, 1963, 2 hours 41 minutes; February, 2 hours 46 minutes.

By letter dated 2-13-63 he was CENSURED inasmuch as an outgoing letter dated 2-7-63 to [redacted] of New York City, contained language which was obviously unsuitable under the existing circumstances. This item of correspondence was prepared under his over-all supervision and it was noted that he personally approved it.

On 3-31-63 Assistant Director C. D. DeLoach rated him EXCELLENT and stated he made an outstanding appearance and made a good impression. He was fast, alert and handled himself very intelligently. He had done

well in his section in streamlining and was ideally suited for his current position. He demanded and received both respect and good discipline from his subordinates and his memoranda were analytical and objective in scope. He had progressed considerably as a Section Chief and his interest and enthusiasm continued at a rapid rate. He was interested in, available for and considered to have excellent qualifications for administrative advancement.

His daily average overtime for March, 1963, 2 hours 25 minutes; April, 2 hours 20 minutes.

During an Inspection of the Crime Records Division in April, 1963, Assistant Director J. H. Gale stated it was stressed to him the need for assuring that correspondence was handled in accordance with Bureau policy. He was also advised that returns from reviewers at the executive level must be kept to an absolute minimum. He had an intense interest in his work, was enthusiastic, and was making every effort to operate the Correspondence and Tours Section with the utmost efficiency.

His daily average overtime for May, 1963, 2 hours 21 minutes; June, 2 hours 15 minutes; July, 2 hours 35 minutes; August, 2 hours 5 minutes; September, 2 hours 33 minutes; October, 2 hours 28 minutes.

He attended Criminal Intelligence In-Service #2 from 10-7-63 to 10-18-63.

His daily average overtime for November, 3 hours 32 minutes; December, 2 hours 23 minutes.

By memorandum dated 12-4-63 he was COMMEDED along with the personnel who so graciously volunteered to work on 11-25-63, in connection with the emergency occasioned by the assassination of the President.

On 12-8-63 he received a Within-Grade Increase to \$16,005 per annum in GS-15.

On 1-5-64 he received a Basic Increase to \$17,210 per annum in GS-15.

His daily average overtime for January, 1964, 2 hours 32 minutes; February, 2 hours 21 minutes; March, 2 hours 28 minutes.

By letter dated 3-31-64 he was CENSURED for an erroneous statement in an official communication prepared by him.

On 3-31-64 he was rated EXCELLENT and comments indicated he was Section Chief in the Crime Records Division. He supervised his Section in a firm and tight manner and his employees respected him. He had worked very hard in attempting to streamline the work of his section and was constantly bringing forth new ideas which in turn inspired his personnel. In addition to his heavy responsibilities, he also devoted considerable personal time in the activities of the Special Agents Mutual Benefits

Association. He was responsible for making many suggestions which had greatly benefited all FBI employees under this program. He was interested in, available for and considered to have excellent qualifications for administrative advancement.

His daily average overtime for April, 1964, 2 hours 21 minutes; May, 2 hours 25 minutes; June, 2 hours 17 minutes; July, 2 hours 31 minutes.

On 7-5-64 he received a Basic Increase to \$18,170 per annum in GS-15.

His daily average overtime for August, 2 hours 17 minutes; September, 2 hours 19 minutes; October, 2 hours 9 minutes; November, 3 hours 5 minutes.

On 11-16-64 the Director saw SA Morrell along with his wife and mother commemorating his admittance to practice in the U. S. Supreme Court this same date.

By letter dated 12-11-64 he was COMMENDED, and through him, the personnel in the Correspondence and Tours Section for the splendid manner in which an extremely high volume of work received during the past three weeks was handled.

During an Inspection of the Crime Records Division in December, 1964, the Inspector [ ] stated he operated continuously at a fast tempo in handling a high volume of short deadlined and highly sensitive correspondence. His attitude was excellent, he was interested in and available for administrative advancement and indicated he had no personal problems. His potential for advancement deemed excellent. b6 b7C

His daily average overtime for December, 1964, 2 hours 40 minutes; January, 1965, 2 hours 40 minutes.

By letter dated 1-22-65 he was COMMENDED, and through him, the personnel of the Correspondence and Tours Section for the splendid manner in which an extremely heavy volume of mail during the past two months had been handled.

His daily average overtime for February, 1965, 2 hours 24 minutes; March, 2 hours 22 minutes.

On 3-31-65 he was rated EXCELLENT and comments indicated he made an outstanding personal appearance and his employees respected him. As Section Chief of the Correspondence and Tours Section he had faced almost insurmountable responsibilities during the rating period and had met these problems with firmness and dedication. He spoke up at Division conferences and did not hesitate to make his opinion known.

The volume of mail had jumped over 50 percent since he became Section Chief in March, 1960. Rather than asking for additional employees, he had found ways in which to streamline his responsibilities to meet the problems at hand. He was interested in, available for, and considered to have excellent qualifications for administrative advancement.

His daily average overtime for April, 1965, 2 hours 19 minutes; May, 2 hours 7 minutes.

By letter dated 5-5-65 the agents in the Correspondence and Tours Section who did such fine work in contributing to the preparation and presentation of the Bureau's portion of the "Early Bird" telecast last Sunday, were COMMEDED, through him.

By letter dated 5-19-65 he was CENSURED inasmuch as he reviewed and approved an outgoing communication dated 5-13-65 at which time he failed to detect the fact that an accompanying legend card contained a serious error.

His daily average overtime for June, 1965, 2 hours 19 minutes; July, 2 hours 19 minutes; August, 2 hours 25 minutes; September, 2 hours 16 minutes; October, 2 hours 21 minutes.

On 10-10-65 he received a Basic Salary Increase to \$18,825 per annum in GS-15.

His daily average overtime for November, 1965, 2 hours 16 minutes.

By routing slip dated 11-4-65 Mr. Tolson commented: "This is the Agent who wrote the memorandum concerning the University of Maryland." The Director noted: "Certainly his deductions were unsound & inaccurate & did not present a true picture." This referred to Mr. Morrell's memorandum to Mr. DeLoach dated 11-3-65 captioned "16th Annual Law Enforcement Institute, University of Maryland." (94-1-8001-214).

By letter dated 12-6-65 he was CENSURED inasmuch as an inquiry had been conducted into the delayed and improper handling of an outgoing communication acknowledging receipt of a book from [redacted] and it had been determined that the Correspondence and Tours Section was definitely at fault. If there had been proper indexing in his section, this excessive delay would have been avoided. As Chief of the Correspondence and Tours Section, it was his responsibility to insure that matters of this nature were taken care of promptly and without embarrassment to the Bureau.

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On 12-5-65 he received a Within-Grade Increase to \$19,415 per annum in GS-15.

During an Inspection of the Crime Records Division in December, 1965, Inspector [ ] stated he concurred in comments of Assistant Director in that SA Morrell made an outstanding personal appearance, and had a most affable personality. He appeared to exercise good judgment in handling the many short deadline matters in his section and had earned the loyalty and full cooperation of his subordinates. He was completely qualified to handle the Correspondence and Tours Section and had the potential to assume additional administrative responsibilities.

His daily average overtime for December, 1965, 2 hours 15 minutes; January, 1966, 2 hours 10 minutes.

By letter dated 1-18-66 he was CENSURED inasmuch as a recent letter to [ ] which was prepared in his section contained a statement which was incorrect. He reviewed and approved the communication.

By letter dated 1-31-66 he was COMMENDED for the outstanding attitude he exhibited in reporting for duty ~~this date~~ despite extremely hazardous travel conditions.

His daily average overtime for February, 1966, 2 hours 16 minutes; March, 2 hours 11 minutes.

On 3-31-66 he was rated EXCELLENT and comments indicated he had an outstanding personal appearance and had an affable personality. He was available for general and special assignment. He served as the Section Chief of the Correspondence and Tours Section and his performance as an administrative leader was outstanding. He had three Units in the Section under his supervision, including two Correspondence Units and one Tour Unit. The primary responsibility in this Section was the review and response to the enormously high volume of correspondence addressed to the Director and Mr. Morrell had performed an outstanding service in his supervision of this major responsibility. In addition to his regular assignments as Section Chief, he handled responsibilities as a representative of the Bureau in the Special Agents Mutual Benefits Association, in which capacity he had personally been responsible for achieving many benefits for FBI employees. He was also active in the affairs of the FBI Recreation Association. He was interested in, available for, and considered to have excellent qualifications for administrative advancement.

His daily average overtime for April, 1966, 2 hours 8 minutes; May, 2 hours 7 minutes.

By letter dated 5-11-66 he was CENSURED inasmuch as he prepared an

outgoing communication dated 5-2-66 which had to be returned since it contained inaccurate information. It was determined that this error was due to the lack of a sufficiently thorough search of Bureau records.

His daily average overtime for June, 1966, 2 hours 40 minutes; July, 2 hours 14 minutes.

On 7-3-66 he received a Basic Salary Increase to \$19,978 per annum in GS-15.

By letter dated 7-12-66 the personnel in the Correspondence and Tours Section were COMMEDED, through him, for the exemplary manner in which they had discharged their responsibilities during the past six months.

His daily average overtime for August, 1966, 2 hours 1 minute.

By letter dated 8-31-66 the personnel in the Crime Records Division were COMMEDED, through him, for the splendid work done in connection with the preparation of comprehensive briefs of interest to the Bureau on a confidential matter. (Re: Briefs on Microphones and Wire Taps).

By letter dated 9-20-66 Special Agent William H. Stapleton and others in the Tour Unit were COMMEDED, through him, for the very effective manner in which they handled their duties relative to the record number of tours of the Bureau this past summer.

His daily average overtime for September, 1966, was 2 hours 15 minutes; October, 2 hours 12 minutes.

By letter dated 11-16-66, he was COMMEDED for his effective work in the expeditious preparation of a large volume of congratulatory letters. (Congratulatory letters - Members of Congress and Governors, 11-8-66, Election.)

During an inspection of the Crime Records Division in November, 1966, Inspector [ ] stated he made an excellent appearance, had a friendly personality and indicated enthusiasm regarding the work of his section. Inspection inquiries indicated he commanded the respect of and secured full cooperation from the employees in the Correspondence and Tours Section.

His daily average overtime for November, 1966, was 2 hours 5 minutes; December, 2 hours 7 minutes.

By letter dated 1-9-67, he was COMMEDED for the excellent job he did during the past year as Vice-President of the FBI Recreation Association.

His daily average overtime for January, 1967, was 2 hours 27 minutes; February, 2 hours 3 minutes.

On 3-31-67 he was rated EXCELLENT, and comments indicated he had served in an admirable fashion as Section Chief of the Correspondence and Tours Section. Under his guidance in this Section were three units, and he had personal supervision over the voluminous correspondence program as well as the tours of Bureau facilities. He was interested in, available for, and had excellent qualifications for administrative advancement.

His daily average overtime for March, 1967, 2 hours 15 minutes; April, 2 hours 8 minutes; May, 2 hours 9 minutes.

On 5-7-67 he received a QUALITY WITHIN-GRADE INCREASE to \$20,585 per annum in GS-15, in recognition of the exceptional manner in which he had discharged his responsibilities during the past year.

His daily average overtime for June, 1967, 2 hours 14 minutes; July, 2 hours 9 minutes; August, 2 hours 10 minutes.

By letter dated 8-18-67 he received his TWENTY-YEAR SERVICE AWARD KEY.

During an Inspection of the Crime Records Division in September, 1967, the Inspector (M. E. Light) stated he possessed an excellent personal appearance and evinced an engaging personality. He was a conscientious, dedicated administrator whose firm but fair supervision maintained respect, cooperation and confidence of his subordinates. He was considered to be wholly competent and eminently well qualified to continue in his present assignment or to assume a position entailing greater administrative responsibilities.

His daily average overtime for September, 1967, 2 hours 11 minutes.

On 10-8-67 he received a Basic Increase to \$21,469 per annum in Grade GS-15.

On 10-11-67 he was PROMOTED to Grade GS-16, \$23,079 per annum, on the Director's approval.

His daily average overtime for October, 1967, 2 hours 6 minutes; November, 2 hours 7 minutes; December, 2 hours 17 minutes; January, 1968, 2 hours 9 minutes; February, 2 hours 24 minutes.

By letter dated 3-29-68 he requested an autographed color photograph of the Director. This was sent on 4-2-68.



On 3-31-68 he was rated EXCELLENT with comments stating he had served as Section Chief of the Correspondence and Tours Section. He had distinguished himself in this capacity for his executive ability, administrative proficiency and personal leadership in handling the heavy volume of work and responsibilities in the Section. He was most competent and the outstanding results achieved in the Section could be attributed to his foresight and loyal support from his associates. He had also represented the Bureau in the Special Agents Mutual Benefit Association and in this role had been responsible for achieving benefits for Bureau personnel. He was interested in, available for, and had excellent qualifications for administrative advancement.

His daily average overtime for March, 1968, 2 hours 7 minutes; April, 2 hours 22 minutes.



## FBI PERSONNEL STATUS FORM

TO: DIRECTOR, FBI

DATE 1-5-68

MY STATUS WITH RESPECT TO THE ITEMS BELOW IS AS FOLLOWS:

(A) NAME: <b>Donald C. Morrell</b>	(B) DATE OF BIRTH: <b>6-13-18</b>	(C) SOCIAL SECURITY NUMBER: <b>100-03-8019</b>
(D) MARITAL STATUS: <input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> DIVORCED <input type="checkbox"/> SEPARATED <input type="checkbox"/> WIDOW <input type="checkbox"/> WIDOWER		
SPOUSE: NAME (maiden if female) <b>Elizabeth Jane Hammer</b>		AGE <b>49</b>
RESIDENCE ADDRESS IF IT DIFFERS FROM YOURS <b>Same</b>		
PLACE OF EMPLOYMENT <b>None</b>		

(E) NAMES OF YOUR IMMEDIATE RELATIVES: (if deceased, so state) (use supplemental sheet if necessary)

## 1. CHILDREN, STEPCHILDREN, THEIR SPOUSES

## RELATIONSHIP

AGE  
(if known)

RESIDENCE (City and State) (if known)

Son

Daughter

## 2. PARENTS (including foster parents, stepparents, guardian, etc.), BROTHERS, SISTERS &amp; THEIR SPOUSES

## RELATIONSHIP

AGE  
(if known)

RESIDENCE (City and State) (if known)

Clark Morrell

Father

Deceased

Anna Harriet Morrell

Mother

76

Oxford, Maryland

Dorothy Clark Kelly

Sister

53

Oxford, Maryland

Roger Michael Kelly

Bro-Law

55

Oxford, Maryland

## 3. YOUR SPOUSE'S PARENTS, BROTHERS &amp; SISTERS

## RELATIONSHIP

AGE  
(if known)

RESIDENCE (City and State) (if known)

John Levering Hammer

Father

Deceased

Emma Gibbon Hammer

Mother

Deceased

John Levering Hammer

Brother

55

Princeton, New Jersey

Philip Gibbon Hammer

Brother

53

Washington, D. C.

(OVER)

(F) NAMES OF ALL RELATIVES INCLUDING THOSE BY MARRIAGE NOW OR PREVIOUSLY EMPLOYED BY THE FBI:

NAME	EXACT RELATIONSHIP	PRESENT EMPLOYEE	FORMER EMPLOYEE
	Son		X

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b7c

(G) NAMES OF ALL RELATIVES INCLUDING THOSE BY MARRIAGE NOW IN GOVERNMENT SERVICE:

NAME	EXACT RELATIONSHIP	GOVERNMENT AGENCY WHERE EMPLOYED

(H) ORGANIZATIONS: ALL EMPLOYEES list all organizations to which you presently belong - do not abbreviate. ONLY SPECIAL AGENTS list former membership in Boy Scouts (indicating exact rank attained) and affiliation with fraternal, honorary or professional groups while in college. NON-AGENTS need not list former memberships at any time.

NAME	PRESENT (All Employees)	FORMER (Agents Only)	CITY AND STATE
Delta Upsilon Fraternity	X		New York, New York
B. P. O. Elks #2357	X		Bethesda, Maryland
Southward Ho Country Club		X	West Islip, New York
Valdosta Country Club		X	Valdosta, Georgia
Prince Georges Country Club		X	Landover, Maryland
Courthouse Country Club		X	Fairfax, Virginia
Bethesda Country Club	X		Bethesda, Maryland
Surf Golf and Beach Club	X		Ocean Drive Beach, S.C.

(I) CURRENT SCHOOL ATTENDANCE STATUS (NON-AGENTS only): ARE YOU ATTENDING COLLEGE, OR ANY OTHER TYPE OF SCHOOL? ☐ NO ☐ YES INDICATE NAME OF INSTITUTION AND SUBJECTS IN WHICH ENROLLED.

(J) PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:

NAME Mrs. Donald C. Morrell RELATIONSHIP Wife  
ADDRESS 5516 Charlcote Road, Bethesda, Maryland 20034

Donald C. Morrell  
(Signature)

Special Agent  
(Title)

(Please type or print)

Name (As it appears on Bureau rolls) <b>Donald C. Morrell</b>		Date <b>8-4-60</b>
Check one: SA <input checked="" type="checkbox"/> SAA <input type="checkbox"/>	Date of Birth <b>June 13, 1918</b>	EOD <b>8-18-43</b>

Education

Name of School	Location	Dates		Degree (Give descriptive title, i.e., BS in Civil Eng.)	
		From	To		
College St. John's University	Brooklyn, New York	9-36	6-38	B. A. (Colgate University)	
Colgate University	Hamilton, New York	9-38	6-40	Major English Literature Minor Philosophy	
Graduate School Columbia Law School	N. Y. City	9-40	6-41	LL. B. (George Washington)	
St. John's University Law School	Brooklyn, New York	9-46	8-47		Major Law
George Washington U. Law School	Wash., D. C.	6-51	2-53		Minor
Miscellaneous or Special Schools (Include Vocational and Radio Schools)					

List all college courses studied in mathematics, engineering and sciences, including chemistry, physics, biology, radio, communications, etc., regardless whether degree obtained. (Use supplemental sheet if necessary.)

Course	Hours	Course	Hours	Course	Hours	Course	Hours
—		—		—		—	
—		—		—		—	
—		—		—		—	

BARS: Federal D.C. Yes Year 1953 State \_\_\_\_\_ Year \_\_\_\_\_ CPA (State) \_\_\_\_\_ Year \_\_\_\_\_  
Other U.S. Court of Appeals, D.C. (1953) U.S. Supreme Court per 162

Foreign Language and Dialects.

(Evaluate your proficiency in each phase as Excellent, Very Good, Good, Fair, or Unsatisfactory.)

Name of Language	Read	Write	Speak	Understand	Translate
Spanish	Unsatisfactory	—	—	—	Unsatisfactory

Source of Proficiency

Name of Language	Native Tongue	Bureau School	Academic	No. Yrs. Studied	Foreign Assignment	Bur. Test Taken	
						Yes	No

If you can handle any foreign language or languages fluently with little or no hesitation, and without use of a dictionary specify same.

If you have had any TRAINING or EXPERIENCE in the writing field including newspaper reporting, writing for a periodical, and creative writing of any kind, set forth as follows:

Training College Courses	No. of Hours	Experience	Period of Experience
93			
NOT IN ORDER			
2 AUG 30 1960			

36

### Previous Employment

Type of work and in what capacity	Proficiency	Period of Experience
Salesman	Good	12/45 to 8/47

### Vocations and Avocations

(Give detailed information regarding any special knowledge, abilities, talents, hobbies, trades, etc., you possess, including athletics.)

Vocation or Avocation	Professional	Amateur	Proficiency	Period of Experience
Golf		X	Good	20+ years

If you feel your experience in any of your previous employments, vocations or avocations is sufficient so that you could use it as a cover in an undercover assignment, identify same.

### Foreign Travel

List all foreign countries you have traveled in; in what capacity, and period there.

### Military Training

Active duty: Branch U. S. Navy Dates of Service 1-22-42 to 1-6-46 Rank Lt. Commander  
 Specialized Military Training \_\_\_\_\_

Are you interested in Foreign Assignment? ☐ Yes ☒ No Location desired \_\_\_\_\_

Typing ability 40 W.P.M. Have you passed Bureau test? ☐ Yes ☒ No

Shorthand ability \_\_\_\_\_ W.P.M. Have you passed Bureau test? ☐ Yes ☒ No

Name of Shorthand system you use \_\_\_\_\_

### Practical Experience in Radio

(State degree of proficiency and length of time spent)

Amateur Radio None. Licenses Held \_\_\_\_\_

Commercial Radio Operator \_\_\_\_\_

Radio, Television or Sound Repairman or Technician \_\_\_\_\_

Experimenter or other \_\_\_\_\_

International Morse Code: Transmit \_\_\_\_\_ W.P.M. Receive \_\_\_\_\_ W.P.M.

Technical Knowledge of any Electronic Devices \_\_\_\_\_

### Miscellaneous

List any other information, qualifications and accomplishments.







1961

DONALD C. MORRELL

FEDERAL BUREAU OF INVESTIGATION  
UNITED STATES DEPARTMENT OF JUSTICE

FD - 140

APPLICATION FOR EMPLOYMENT

DIRECTOR,

FEDERAL BUREAU OF INVESTIGATION,  
UNITED STATES DEPARTMENT OF JUSTICE,  
WASHINGTON, D. C.

Brightwaters, N.Y.

May 24, 1947

Sir:

I hereby make application for employment in the position indicated by check marks in the Federal Bureau of Investigation, United States Department of Justice, and for your use in this connection submit the following information:

employee  
Special Agent (Law Trained) ☒ \*\*  
Special Agent (Accountant) ☐ \*\*  
Stenographer ☐  
Typist ☐  
Translator ☐  
Messenger ☐ \*\*  
Laboratory Technician\* ☐ \*\*  
Student Fingerprint Classifier ☐  
Clerk ☐

(This application should be typewritten if possible) (Indicate by check)

1. Name in full (please print) MORRELL DONALD CLARK  
(Family name) (Given name) (Middle name)

(a) Female applicants must furnish maiden name

2. Legal Residence 341 Woodland Drive, Brightwaters, New York.

3. Mail and telegraphic address same Phone No. Bay Shore 4434

4. Complete date of birth June 13 '18 Weight 155 Height 5' 8"

5. Place of birth Brooklyn Kings New York  
(City) (County) (State)

6. (a) Father's name Clark Morrell (b) Father's birthplace New York, NY  
546 Potter Blvd

(c) Present address Brightwaters, N.Y. (d) If foreign born, is he a citizen?

(e) Date and place of naturalization

7. (a) Mother's name Anna Ranck Morrell (b) Mother's birthplace Kinzer, Penna  
546 Potter Blvd

(c) Present address Brightwaters, N.Y. (d) If foreign born, is she a citizen?

(e) Date and place of naturalization

8. Brothers none  
(Complete names, birthplaces and present addresses)

9. Sisters Mrs. Roger Michael Kelly, 307 Woodland Dr. Brightwaters, Ny.  
born Brooklyn, N.Y.  
(Include married names, birthplaces and present addresses)

10. If you were not born in United States, how long have you lived here?

11. Are you a citizen of the United States? yes

12. If naturalized, date and place of naturalization

13. Are you single, married, widowed, separated, or divorced? Married

14. (a) Maiden name of wife Elizabeth Hammer (b) Wife's birthplace Philadelphia, Pa.  
341 Woodland Drive

(c) Present address Brightwaters, N.Y. (d) If foreign born, is she a citizen?

(e) Date and place of naturalization

15. (a) Husband's complete name (b) Husband's birthplace

(c) Present address (d) If foreign born, is he a citizen?

\*Specify position sought as Laboratory Technician.  
\*\*Positions (Law Trained), Special Agent (Accountant),  
Laboratory Technician, and Messenger for male applicants only.

See detailed description sheets which will be furnished on request.

67-421042-1  
Searched  
Married  
Filed  
JUN 13 1947  
FEDERAL BUREAU OF INVESTIGATION

(e) Date and place of naturalization \_\_\_\_\_

16. (a) Father-in-law's name John L. Hammer (b) Birthplace Philadelphia, Penna(c) Present address deceased (d) If foreign born, is he a citizen? \_\_\_\_\_

(e) Date and place of naturalization \_\_\_\_\_

17. (a) Mother-in-law's name Emma G. Gibbon (b) Birthplace Philadelphia, Penna(c) Present address 341 Woodland Dr  
Brightwaters, N.Y. (d) If foreign born, is she a citizen? \_\_\_\_\_

(e) Date and place of naturalization \_\_\_\_\_

18. Brothers-in-law J.L. Hammer, Jr Born Phila Pa Spring Lane Roxborough Phila Pa  
P.G. Hammer born Phila. Pa 3592 Roxboro Rd N E Atlanta Georgia19. Sisters-in-law R.M. Kelly born Baltimore, Md. 307 Woodland Drive Brightwaters, N.Y.

(Complete names, birthplaces and present addresses)

none20. If your ~~husband~~ (or wife) is employed, state where employed home21. Number of children, if any two22. Are you entirely dependent on your salary? yes23. To what extent are you financially indebted to others and to whom? \$5200 mortgage on  
house, \$400 FHA improvement loan, First Nat'l BK & Tr. Bay shore, N.Y.

24. Education: (Please print.)

	NAME AND LOCATION OF SCHOOL	FROM—	TO—	COURSES PURSUED, DIPLOMAS OR DEGREES RECEIVED
(a) Elementary	<u>St. Thomas Choir School</u> <u>123 W 55 St., N.Y., N.Y.</u>	<u>1927</u>	<u>1932</u>	<u>general</u>
(b) High school equivalent	Name <u>Poly. Prep. Ctry Day</u> Address <u>Brooklyn, N.Y.</u>	<u>1932</u>	<u>1936</u>	<u>"</u>
(c) College or technical *	Name <u>St. John's Univ</u> Address <u>Brooklyn, N.Y.</u>	<u>1936</u>	<u>1938</u>	<u>--</u>
	<u>Colgate University</u> <u>Hamilton, New York.</u>	<u>1938</u>	<u>1940</u>	<u>A.B.</u>
(d) Foreign Languages Give degree of proficiency as to speaking, reading, writing	<u>spanish (read) fair</u> <u>French (read) poor</u>			
	<u>Columbia Law School</u> <u>New York, N.Y.</u>	<u>1940</u>	<u>1941</u>	<u>--</u>
(e) Miscellaneous *	<u>St John's Law School</u> <u>Brooklyn, N.Y.</u>	<u>1946</u>	<u>present</u>	

25. Give names of clubs, societies, and other similar organizations of which you are a member:  
Delta Upsilon Fraternity, Omega Alpha Pi Fraternity, South Bay Golf Club.26. Have you been admitted to the Bar, if so specify No

(Furnish Date and Place)

27. Describe any physical defects, including extent of defective vision, if any, with and without

\* Applicants for Laboratory Technician positions should list all courses pursued, using an insert if necessary and give title of any Master's thesis prepared.

34. Give residence addresses and dates of residence for the past ten years.

341 Woodland Drive, Brightwaters, N.Y. March 1, 1945-----  
546 Potter Boulevard, Brightwaters, N.Y. June 1937-Mar 1945

35. List the names of any relative now in the Government service, with the degree of relationship, and where employed: none

Names of any friends or acquaintances who are employed in the Federal Bureau of Investigation:-----

Frank Mulderig S A N

36. Give dates and branch of military service, if any, also type of discharge received and basis for it, also military serial number.

U.S. Navy Sept. 10, 1941 (active Jan 22 1942) to Jan 5, 1946. (119838)  
Returned to inactive duty, honorably, still member of Reserve.

36a. Do you claim veteran's preference? If so, give basis:-----  
yes; 44 months active duty, 28 months overseas.

Do you now have any service disability? If so, give percentage. None

37. What is the lowest entrance salary you will accept? \$4525.80

38. Are you in a position to accept probationary employment at any time, without previous notice, and, if notice is required, how much? yes; two weeks.

39. In the event of appointment will you be willing to proceed to Washington, D.C., upon 10 days' notice and at your own expense? yes

40. If appointed are you willing and prepared to accept assignment or transfer to any part of the United States where services are required, for either temporary or permanent duration? yes

41. Attach unmounted full face photograph not larger than 3 by 4 1/4 inches. Write your name plainly on back of photograph. Photograph to be taken not more than 30 days prior to date of application.  
 (Application will not be considered complete if such photograph not furnished)



Respectfully,

Donald C. Morrell  
 (Signature of applicant as usually written)

NOTE.—If the applicant desires to make any further remarks or statements concerning his qualifications or in answer to any question contained in the application, the same should be made on a separate sheet of paper, numbering the remarks in accordance with the original questions.

at must be subscribed to by all applicants for positions in the Federal Bureau of Justice.

Subscribed and duly sworn to before me by the above-named applicant, this 22 day of May, 1947, at city (or town) of New York, county of New York, and State (or Territory or District) of New York.

[OFFICIAL IMPRESSION SEAL]

(Signature of official)

NOTARY PUBLIC, New York County

Commission Expires March 30, 1948

(Official Title)

Application will not be considered complete if above jurat not executed.

glasses (Shellen)

None known

3

28. Health record for the past 3 years (give number of days and nature of serious illness):  
none

29. Experience: (Please print.)

NAME AND ADDRESS OF EMPLOYER	POSITION AND KIND OF WORK	FROM—	TO—	ANNUAL SALARY
Name Peel Richards Ltd Address 303 Wash. St B'klyn-NY	Sales	5/1/47	present	\$4000
Name Brooklyn W&S Inc Address 303 Wash St B'klyn-NY	salesman	12/17/45	4/30/47	\$6500
Name Conken Haberdashery Address Bay Shore N.Y.	salesman	9/1/41	1/1/42	\$165mo
Name Village of Brightwaters Address Brightwaters, N.Y.	village police	6/1/41	9/1/41	\$125mo
Name Address				
Name Address				
Name Address				
Name Address				
Name Address				

30. Specify any arrests (include traffic arrests) none

31. Specify any arrests of immediate family none

32. Have you ever been a defendant in any court action? no

Specify:

33. Give five personal references (not relatives, former employers, fellow employees, or school teachers), more than 30 years of age, who are householders or property owners, business or professional men or women, including your family physician, if you have one, of good standing in the community, and who have known you well during the past 5 or more years. (Please print)

NAME	RESIDENCE ADDRESS	NUMBER OF YEARS ACQUAINTED	BUSINESS ADDRESS.
1. Olin Brewster	Ocean Avenue Bay shore, N.Y.	10	1st Nat'l Bk & Tr Bay Shore, N.Y.
2. Earl Gibson	Maple Avenue Bay Shore, N.Y.	12	Main St. Bay Shore, N.Y.
3. Paul K. Roth	Lakeview Ave West Brightwaters, N.Y.	10	14 WEST 34 ST NEW YORK, N.Y.
4. George Young	North Windsor Ave Brightwaters, N.Y.	15	Erasmus Hall H.S. Flatbush Ave B'klyn N.Y.
5. Dr. Herbert Fett	54 8th AVENUE BROOKLYN, NEW YORK	12	(same)

✓ 9  
AUG 28 1969

August 28, 1969

Mr. Donald C. Morrell  
Post Office Box 721  
Ocean Drive Beach, South Carolina 29582

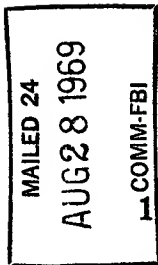
Dear Morrell:

I received your letter on August 25th regarding the successful efforts of Messrs. Callahan and Adams in notifying Mr. Davidson and you of the death of Mr. Cavanaugh. His passing leaves a void in the hearts of all of us who had the pleasure of knowing and working with him, and I know your kindness helped sustain his wife and family at this time of sorrow.

Callahan and Adams join me in expressing appreciation for your thoughtfulness in writing.

Sincerely,

J. Edgar Hoover



1 - Mr. Callahan - Enclosure  
Personal Attention: Bring to the attention of SA James B. Adams.

1 - Personnel File of SA James B. Adams

NOTE: Mr. Morrell is on the Special Correspondents List and is a former SA who EOD 8-18-47 and retired on 6-24-68. Mr. C. Ray Davidson is on the Special Correspondents List and he is a former SA who EOD as a Clerk on 4-30-34; SA on 1-10-38 and retired on 12-17-65. The late SA Cavanaugh died on 8-10-69.

GEM:lvc (5)

h  
h  
Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Bishop \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

MAIL ROOM ☐ TELETYPE UNIT ☐

# FIELD FIREARMS TRAINING RECORD

SPECIAL AGENT

DONALD C. MORRELL

FD-40  
3-25-47

OFFICE	MO. YR.	DA HS	PPC	SG	.30	MG	GAS	RD	Mo. Pract.	Sh ap Shooting	QUALI- FIED
Atlanta	11/44								✓		Det. Tactics
"	12/44								✓		
"	1/50								✓		
"	2/50								✓		
In Service, 3/20-3/31		88	100		81	100					
Atlanta	4/50				90	88				✓	✓
"	5/50	100	95	90							✓
"	6/50	98	95/98	✓		95					
"	7/50	90	95	100							
"	8/50	88	95	#2 ✓		83					
"	9/50				81	93					✓
"	10/50								✓		
"	11/50								✓		
"	12/50								✓		
"	1/51								✓		
"	2/51								✓		
Wash. Field	3/51								✓		
	4/51				96	96					
	5/51	84	98	100							
	6/51	94	96	#2		86					
	7/51	98	91	#2		94					
	8/51	Annual leave									
makeups	9/51	90	98	100							
	9/51				71	98					
	10/51										

BRC  
 REMOVED FROM FIELD  
 PERSONNEL FILE  
 67 - NOT RECORDED

SEARCHED \_\_\_\_\_ INDEXED \_\_\_\_\_  
 SERIALIZED \_\_\_\_\_ FILED \_\_\_\_\_  
 DEC 6 1951  
 FBI - WASH. F. O.

67-170-51

67-39411-7

# FIELD FIREARMS TRAINING RECORD

SPECIAL AGENT

Donald C. Morrell

FD-40  
3-25-47

OFFICE	MO. YR.	HS	PPC	SG	.30	MG	GAS	RD	Pistol Pract.	QUALI- FIED
Jr. School 8/18-11/1/47	12/47	94	80	100	88	96				
Charlotte	1/48								✓	
"	2/48								✓	
"	3/48								✓	
"	4/48		90	100	79	83	✓			
"	5/48	special assignment								
"	6/48	96	91	90		75	✓	✓		
"	7/48	94	90.8	100			✓	✓		
Atlanta	8/48	Annual Leave								
"	9/48	84	90	100		98				
"	10/48	100	98			95	Make-up			
"	11/48			100	79	83				
"	12/48								✓	
"	1/49								✓	
"	2/49								✓	
"	3/49								✓	
"	4/49			100	82	98				
"	5/49	92	85.6	100	94		REMOVED FROM FIELD PERSONNEL FILE 67 - NOT RECORDED IN 1951			
"	6/49	94	90			98				
"	7/49	100	93	100						
"	8/49	84	89			85				
"	9/49				86	75				
"	10/49	RECORDED IN 1951								
"	11/49								✓	

FBI - ATLANTA  
DEC 19 1948

(7-4204-2)



FD-107  
(1-1-45)

DUPLICATE PROPERTY RECORD

(This record is to be kept up-to-date and should be maintained  
in the field personnel file of the special agent.)

NAME DONALD C. MORRELL

Badge # 4028, with case  
Commission Card with case, # 4397  
FBI Handbook # 4218  
Tax Exemption Identification Card # \_\_\_\_\_  
Agents Brief Case 1 - Accountant's brief case  
Zipper Brief Case \_\_\_\_\_  
G.T.R. Identification Card # \_\_\_\_\_

**FIREARMS:**

Official Police Revolver # 658244  
Official Police Hip Holster 1  
Grip Adapter 1

REMOVED FROM FIELD  
PERSONNEL FILE  
67 - NOT RECORDED  
20 JAN 22 1971

NOT RECORDED

NOTIFICATION OF PERSONNEL ACTION  
(EMPLOYEE — See General Information on Reverse)

5 PART  
50-124-04

(FOR AGENCY USE)

1. NAME (CAPS) LAST—FIRST—MIDDLE <b>MORRELL, DONALD C. (MR.)</b>		MR.—MISS—MRS.	2. (FOR AGENCY USE)	3. BIRTH DATE (Mo., Day, Year) <b>6-13-18</b>	4. SOCIAL SECURITY NO. <b>100-03-8019</b>
5. VETERAN PREFERENCE <b>2</b> 1—NO 2—5 PT. 3—10 PT. DISAB. 4—10 PT. COMP. 5—10 PT. OTHER			6. TENURE GROUP	7. SERVICE COMP. DATE	8. PHYSICAL HANDICAP CODE
9. FEGLI <b>1</b> 1—COVERED 2—INELIGIBLE 3—WAIVED			10. RETIREMENT <b>1</b> 1—CS 2—FICA 3—FS 4—NONE 5—OTHER		11. (FOR CSC USE)
12. CODE NATURE OF ACTION <b>RETIREMENT (20 YEARS INVESTIGATIVE EXPERIENCE)</b>			13. EFFECTIVE DATE (Mo., Day, Year) <b>cb 7-3-68</b>		14. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
15. FROM: POSITION TITLE AND NUMBER <b>Supervisory Special Agent (Chief of the Correspondence and Tours Section) 160</b>			16. PAY PLAN AND OCCUPATION CODE <b>GS</b>	17. (a) GRADE OR LEVEL <b>16</b> (b) STEP OR RATE <b>4</b>	18. SALARY <b>\$23,079 pa</b>
19. NAME AND LOCATION OF EMPLOYING OFFICE					

20. TO: POSITION TITLE AND NUMBER		21. PAY PLAN AND OCCUPATION CODE	22. (a) GRADE OR LEVEL (b) STEP OR RATE	23. SALARY
24. NAME AND LOCATION OF EMPLOYING OFFICE				

25. DUTY STATION (City—county—State)		26. LOCATION CODE	
27. APPROPRIATION <b>S. &amp; E., FBI</b>		28. POSITION OCCUPIED 1—COMPETITIVE SERVICE <b>2</b> 2—EXCEPTED SERVICE	29. APPORTIONED POSITION FROM: TO: STATE 1—PROVED-1 2—WAIVED-2

30. REMARKS: ☐ A. SUBJECT TO COMPLETION OF 1 YEAR PROBATIONARY (OR TRIAL) PERIOD COMMENCING ☐ B. SERVICE COUNTING TOWARD CAREER (OR PERMANENT) TENURE FROM: ☐ C. DURING PROBATION ☐ D. FROM APPOINTMENT OF 6 MONTHS OR LESS

SEPARATIONS: SHOW REASONS BELOW, AS REQUIRED. CHECK IF APPLICABLE:

At his request, he voluntarily retired in view of Section 6 (c) of the Civil Service Retirement Act.

Annuity payments to commence 7-4-68.

Employee retired stating he wishes to be in a position to devote more time to his family.

Forwarding Address: P. O. Box 721  
Ocean Drive Beach, South Carolina 29582

Paid hereon for the period 6-30-68 thru cb 7-3-68. Lump sum payment to cover 434 hours commencing bob 7-4-68 and ending after 2 hours on 9-18-68. (2 hol incl) Lump sum payment after 7-14-68 paid at new salary rate ( \$25,118.00)

31. DATE OF APPOINTMENT AFFIDAVIT (Accessions only)		34. SIGNATURE (Or other authentication) AND TITLE <b>J. E. Hoover</b> Director	
32. OFFICE MAINTAINING PERSONNEL FOLDER (If different from employing office)		35. DATE <b>6-21-68</b>	
33. CODE <b>DJ 02</b>	EMPLOYING DEPARTMENT OR AGENCY FEDERAL BUREAU OF INVESTIGATION WASHINGTON, D.C. 20535		

4. PERSONNEL FOLDER COPY

**MEDICAL REPORTS**

Personnel File of Morrell, Donald C.

Personnel File No. \_\_\_\_\_



3/14

CLINICAL RECORD						ELECTROCARDIOGRAPHIC RECORD		PREVIOUS ECG	
CLINICAL IMPRESSION <i>Routine</i>						MEDICATION		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
								<input type="checkbox"/> EMERGENCY	<input type="checkbox"/> BEDSIDE
								<input checked="" type="checkbox"/> ROUTINE	<input checked="" type="checkbox"/> AMBULANT
AGE <i>49</i>	SEX <i>M</i>	RACE <i>Cauc</i>	HEIGHT" <i>67 1/2</i>	WEIGHT <i>158</i>	B. P.	SIGNATURE OF WARD PHYSICIAN <i>Dr. Fox</i>			DATE <i>1-23-68</i>
RHYTHM						AXIS DEVIATION (QRS)		RATES	
INTERVALS						P WAVES		AURIC. VENT.	
PR						QRS		QT	
QRS COMPLEXES									
RS-T SEGMENT						T WAVES			
UNIPOLAR EXTREMITY LEADS (Specify)									

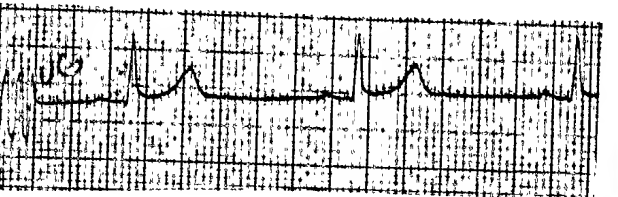
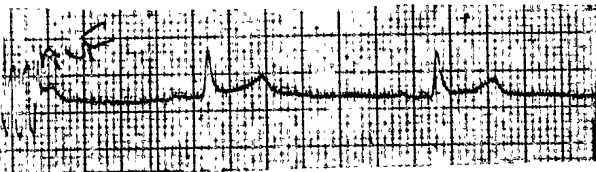
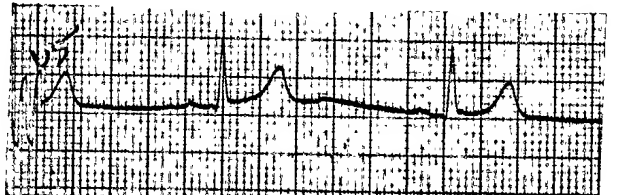
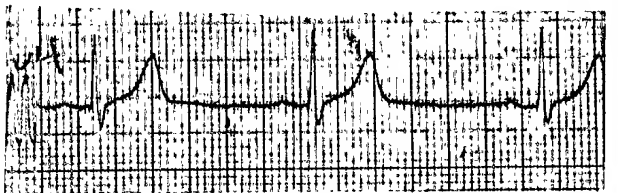
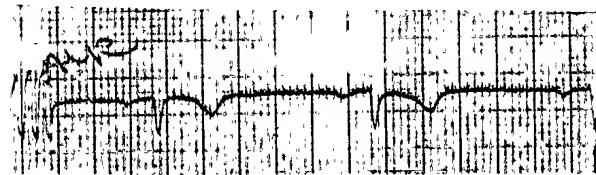
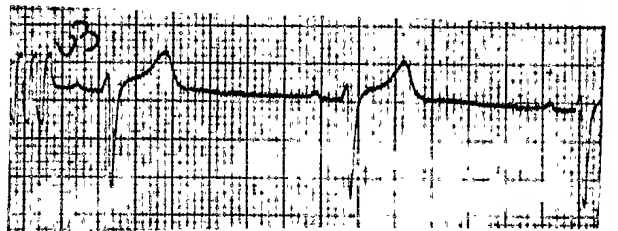
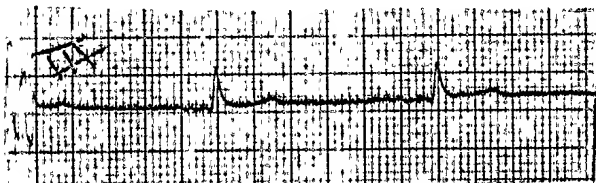
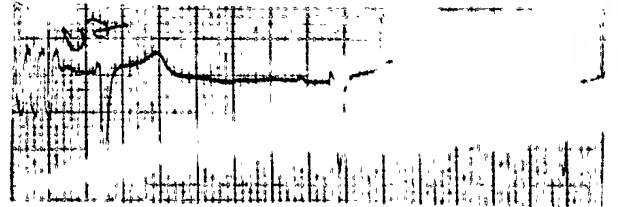
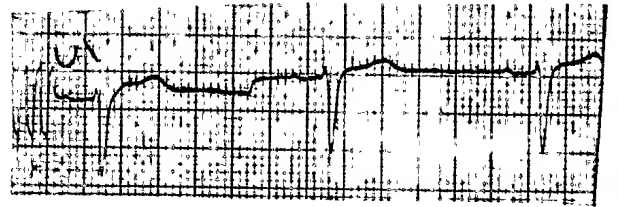
PRECARDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

*Sinus Brady cardia -  
Early repolarization -  
WNL.  
NSCS 10 Feb 67*

(Continue on reverse)

NO. ECG <i>001204-67</i>	SIGNATURE <i>[Signature]</i>	TITLE	DATE <i>23 Jan 68</i>
PATIENT'S IDENTIFICATION (For typed or written entries give: Name - last, first, middle; grade; date; hospital or medical facility)			REGISTER NO.
<i>Morrell, Donald C.</i>			WARD NO. <i>ROOM</i>
<i>SA-FBI</i>			
<i>NNMC</i>			



CLINICAL RECORD		ELECTROCARDIOGRAPHIC RECORD				PREVIOUS ECG <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
CLINICAL INDICATION <i>Routine</i>				MEDICATION		<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input checked="" type="checkbox"/> ROUTINE <input checked="" type="checkbox"/> AMBULANT	
AGE <i>48</i>	SEX <i>m</i>	RACE <i>Cauc</i>	HEIGHT <i>67 1/2</i>	WEIGHT <i>157</i>	B. P.	SIGNATURE OF WARD PHYSICIAN	
RHYTHM						DATE <i>2-1-67</i>	
INTERVALS PR QRS QT				AXIS DEVIATION (QRS)		RATES AURIC. VENT.	
QRS COMPLEXES				P WAVES			
RS-T SEGMENT <i>early repolarization</i>				T WAVES			
UNIPOLAR EXTREMITAL LEADS (Specify)							
PRECORDIAL LEADS (Specify)							

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

*old tracing not received*

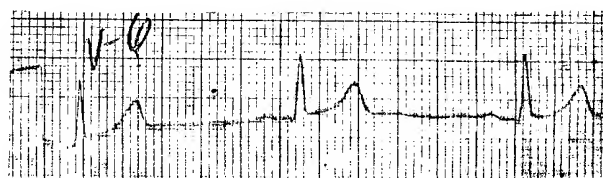
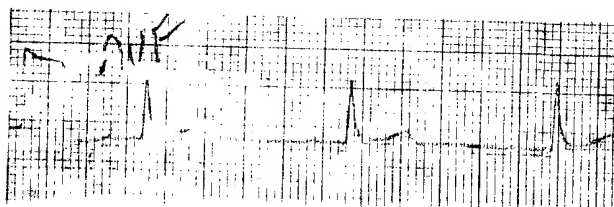
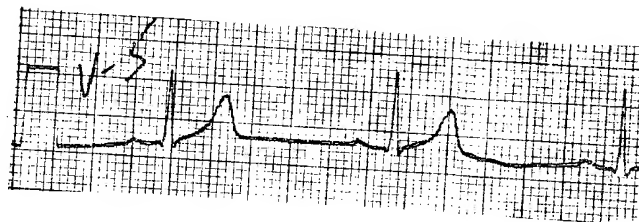
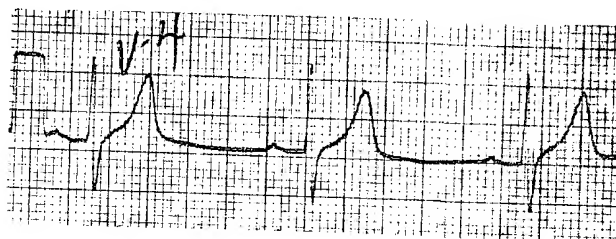
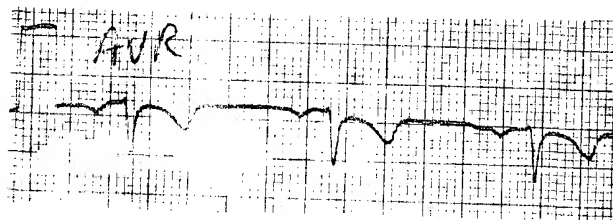
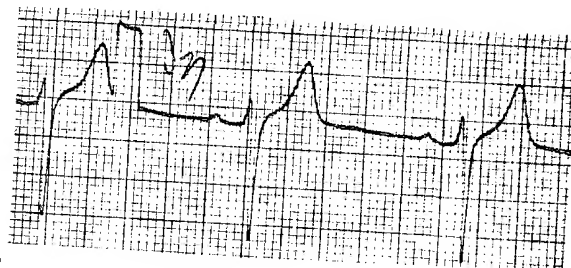
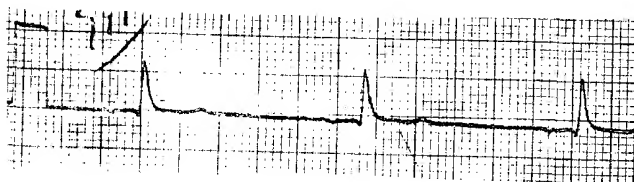
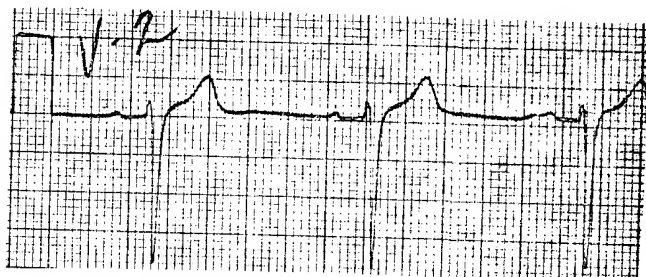
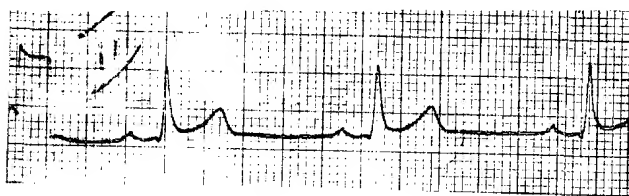
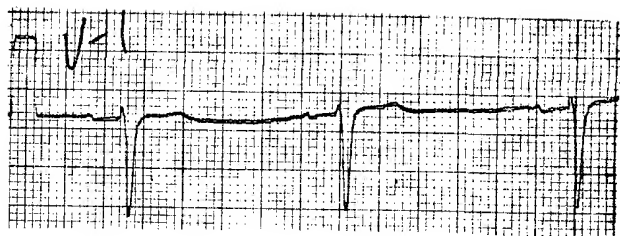
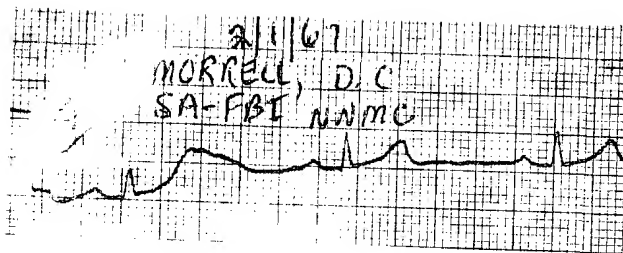
**WITHIN NORMAL LIMITS**

*FCJ*  
FRANCIS C. JOHNSON  
LT. (MC) U.S.N.

(Continue on reverse)

NO. ECG <i>1184</i>	SIGNATURE	TITLE	DATE <b>10 FEB 1967</b>
PATIENT'S INFORMATION (print or written - initials give Name last, first, middle; grade, date, hospital or medical facility)		REGISTER NO.	WARD NO. <i>T-17</i>

*MORRELL, W. C.*  
*SA - FBI*  
*NNMC*



CLINICAL RECORD

ELECTROCARDIOGRAPHIC RECORD

PREVIOUS ECG

CLINICAL IMPRESSION

MEDICATION

☐ EMERGENCY  
☒ ROUTINE

☐ BEDSIDE  
☒ AMBULANT

DATE  
2-15-66

AGE 47 SEX M RACE Caus HEIGHT 67 1/2" WEIGHT 158

SIGNATURE OF WARD PHYSICIAN

RHYTHM

AXIS DEVIATION (QRS)  
+60°

RATES  
AURIC. VENT 50

INTERVALS

P WAVES

PR

QRS

QT

QRS COMPLEXES

RS-T SEGMENT

T WAVES

UNIPOLAR EXTREMITY LEADS (Specify)

PRECORIAL LEADS (Specify)

1.) Sinus bradycardia  
2.) Early repolarization ST segment elevations  
3.) WITHIN NORMAL LIMITS  
NO SIGNIFICANT CHANGE SINCE 3/19/65

(Continue on reverse)

NO.

EGG 001584

SIGNATURE

TITLE

DATE  
2/15/66

PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)

REGISTER NO.

WARD NO.

MORRELL, Donald C.

SA-FBI

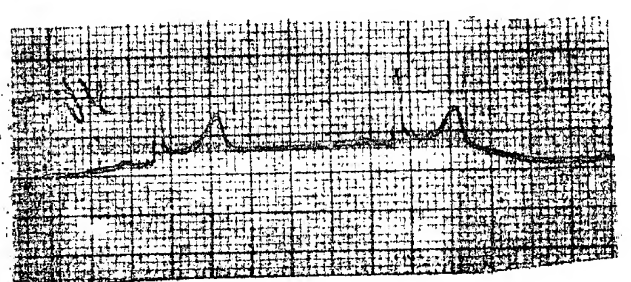
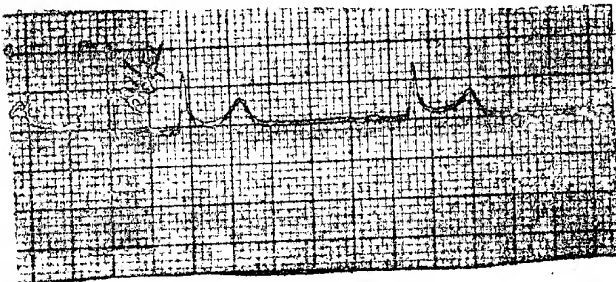
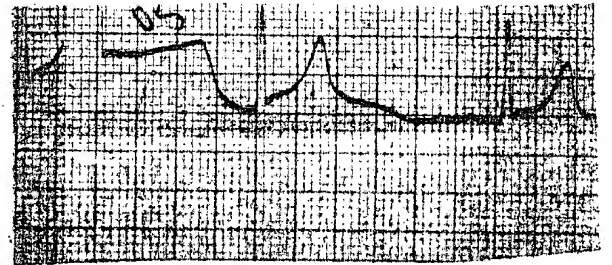
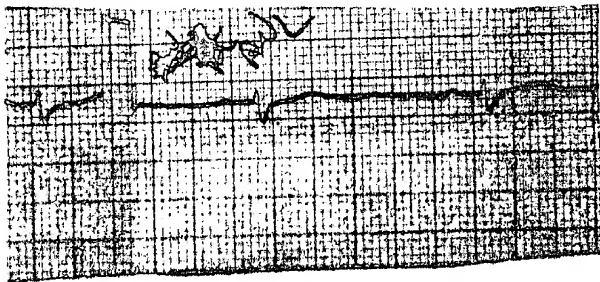
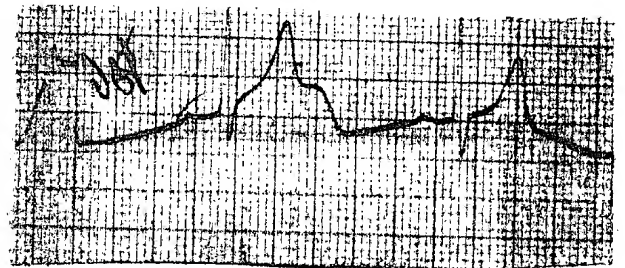
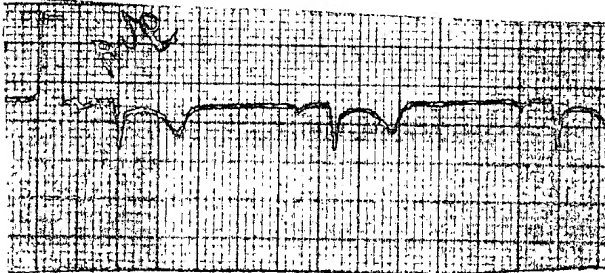
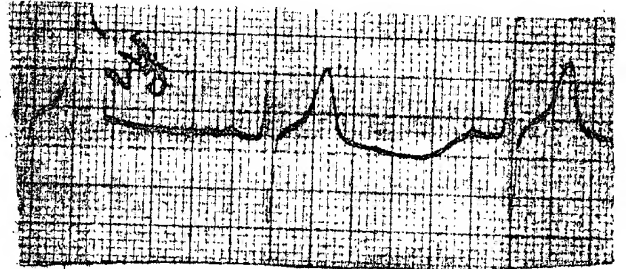
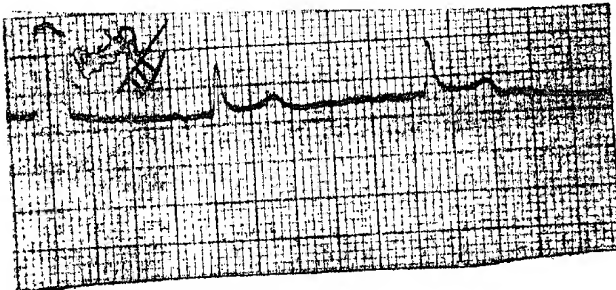
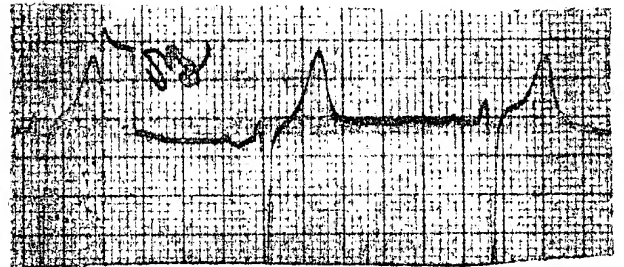
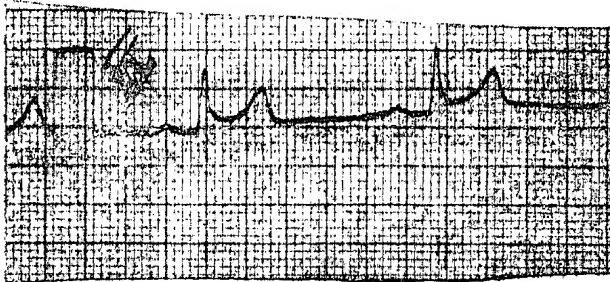
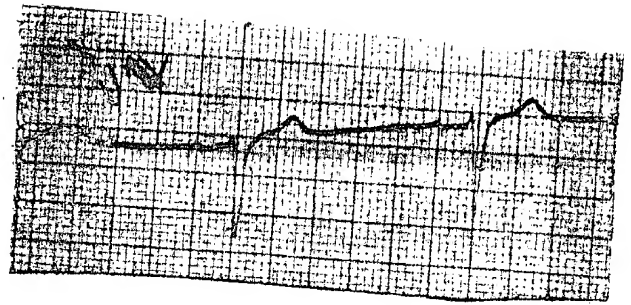
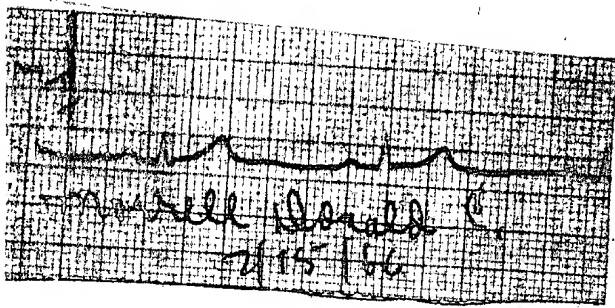
ELECTROCARDIOGRAPHIC RECORD

Standard Form

520-104

(Attach tracings to S-T)





Standard Form 520  
Rev. April 1964  
Prescribed by the  
Department of Defense

PREVIOUS ECG

CLINICAL RECORD		ELECTROCARDIOGRAPHIC RECORD		PREVIOUS ECG	
CLINICAL IMPRESSIONS		MEDICATION		YES	NO
AGE	SEX	RACE	HEIGHT	WEIGHT	B.P.
21	M	W	61	154	
SIGNATURE OF WARD PHYSICIAN				DATE	
				3-19-64	
RHYTHM		AXIS DEVIATION (QRS)		RATES	
N SR		+65		AURIC 55 VENT 55	
INTERVALS		P WAVES			
PR 17 QRS 08 QT 37		N			
QRS COMPLEXES		T WAVES			
N		N			
RS T SEGMENT					
↑ II, III, aVF, V5 & V6					
UNIFORM AN EXTREMITY LEADS (Specify)					
V. 2, 3, 4					

PRECARDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS

Early Repolarization

NO CHANGES SINCE 3/24/64

CHIEF OF MEDICAL SERVICE

(Cor) G. T. STRICKLAND  
LT MC USN

NO SIGNATURE

PATIENT'S IDENTIFICATION (For typed or written entries give: Name--last, first middle, grade, date; hospital or medical facility)

MORRELL, DONALD CLARK

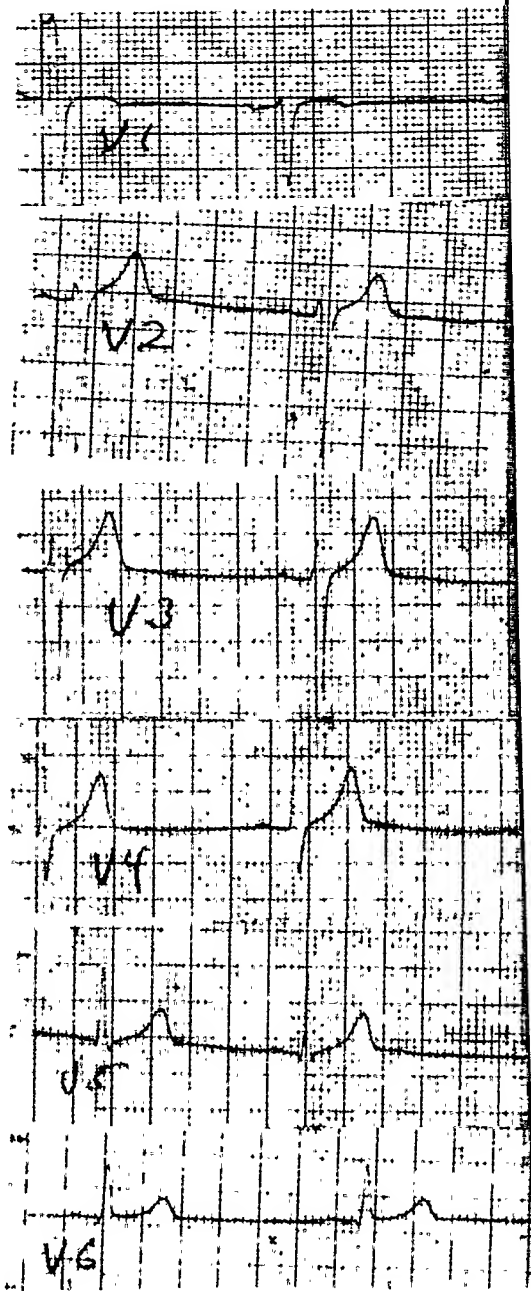
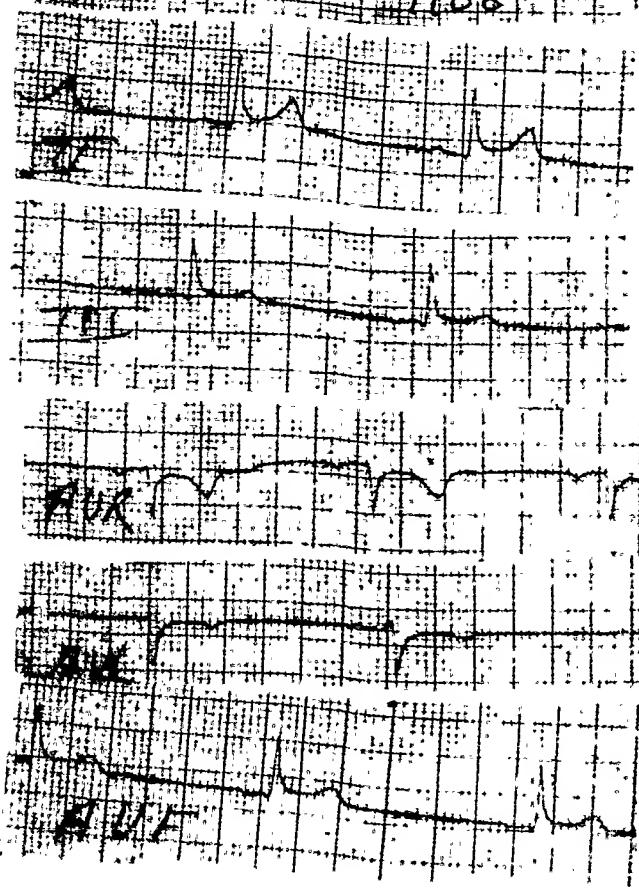
REGISTER NO  
FBI

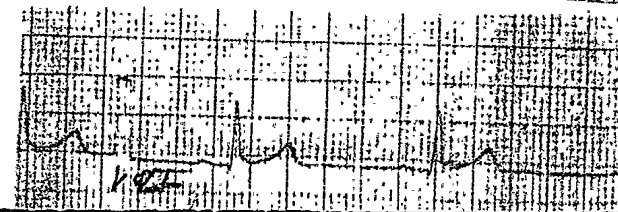
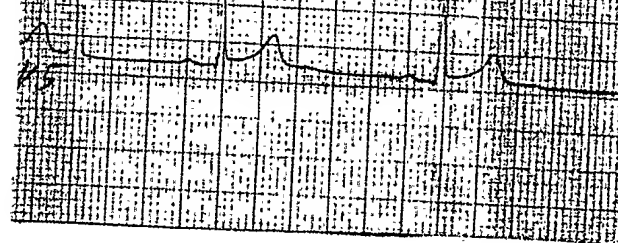
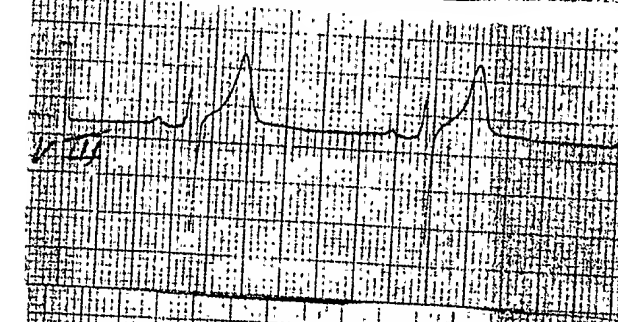
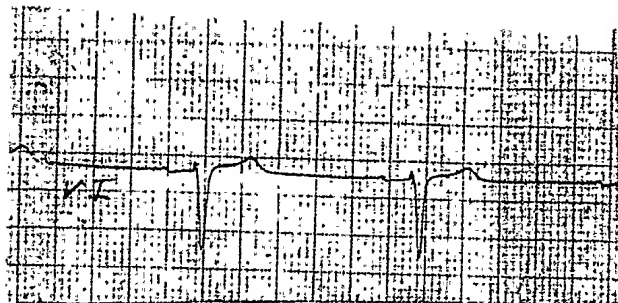
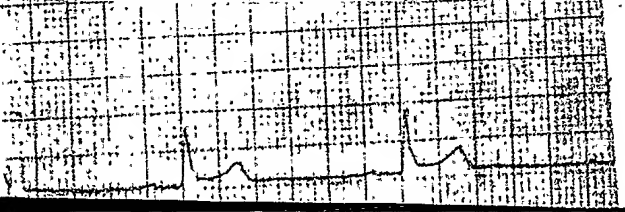
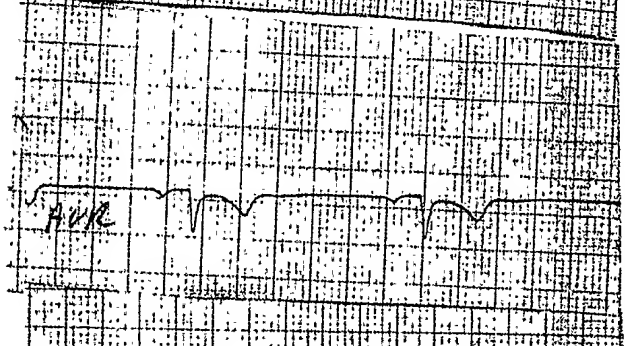
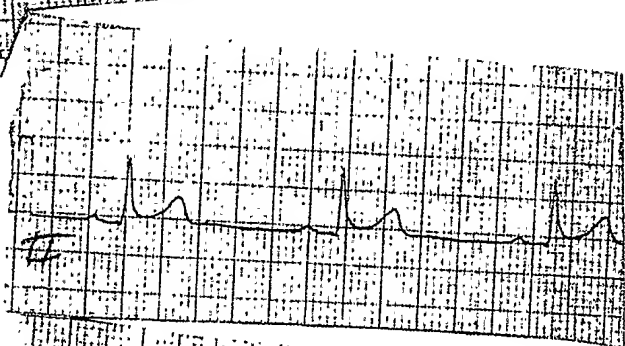
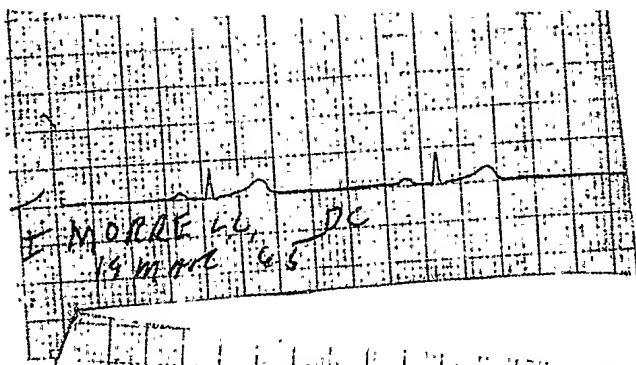
DATE  
19 MAR 1964  
WARD NO  
STAFF CL

ELECTROCARDIOGRAPHIC RECORD  
Standard Form 520

Attach to Form 520

MORRELLS, DONALD C.  
3-24-64 1100





CLINICAL RECORD						ELECTROCARDIOGRAPHIC RECORD							
CLINICAL IMPRESSION						MEDICATION						PREVIOUS ECG	
												<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
												<input type="checkbox"/> EMERGENCY	<input type="checkbox"/> BEDSIDE
												<input checked="" type="checkbox"/> ROUTINE	<input checked="" type="checkbox"/> AMBULANT
AGE	SEX	RACE	HEIGHT	WEIGHT	B P	SIGNATURE OF WARD PHYSICIAN						DATE	
45	M	CAUC.	67	157								3-24-64	
RHYTHM						AXIS DEVIATION (QRS)						RATES	
Regular						+75°						AURIC. VENT. 50	
INTERVALS						P WAVES							
PR 0.18 QRS 0.08 QT 0.40						WNL							
QRS COMPLEXES													
RS-T SEGMENT						T WAVES							
WNL						V AVL							
UNIPOLAR EXTREMITY LEADS (Specify)													

Early repolarization

PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

WNL  
No change

(Continue on reverse)			
NO.	SIGNATURE	TITLE	DATE
ECG	<i>[Signature]</i>		3-24-64
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)		REGISTER NO.	WARD NO.
		FBI	STAFF CLINIC

MORRELL, DONALD CLARK

ELECTROCARDIOGRAPHIC RECORD  
Standard Form 590  
(Attach tracings to S. F. 597)

SA-FBI

CLINICAL RECORD						ELECTROCARDIOGRAPHIC RECORD		PREVIOUS ECG <input type="checkbox"/> YES <input type="checkbox"/> NO	
CLINICAL IMPRESSION						MEDICATION		<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT	
AGE <u>44</u>	SEX <u>M</u>	RACE <u>5-7</u>	HEIGHT <u>157</u>	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN <u>4/6/63@ 1050</u>			DATE
RHYTHM <u>Sinus</u>						AXIS DEVIATION (QRS) <u>+75</u>		RATES AURIC. VENT <u>54</u>	
INTERVALS PR <u>.20</u> QRS <u>.16</u> QT <u>.40</u>						P WAVES <u>diphasic III</u>			
QRS COMPLEXES <u>normal</u>									
RS-T SEGMENT <u>slightly elevated II</u>						T WAVES <u>normal</u>			
UNIPOLAR EXTREMITY LEADS (Specify)									

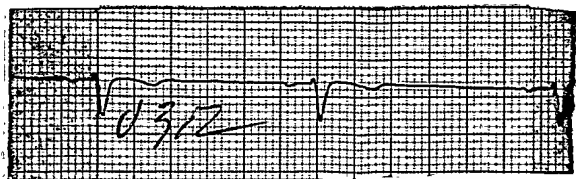
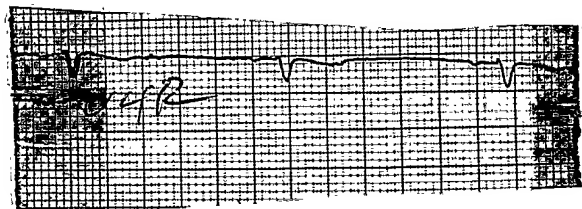
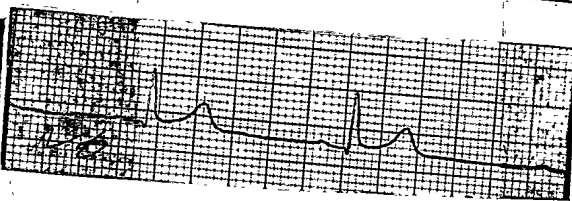
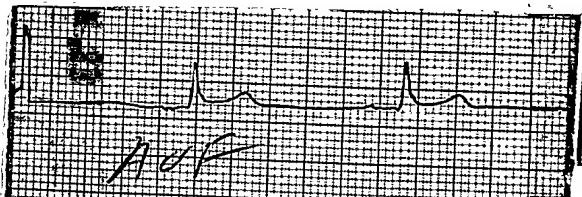
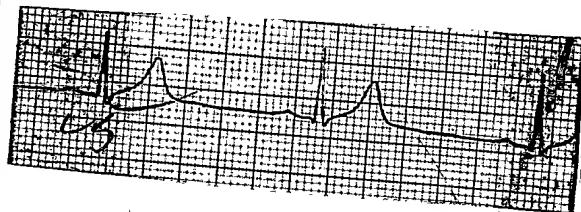
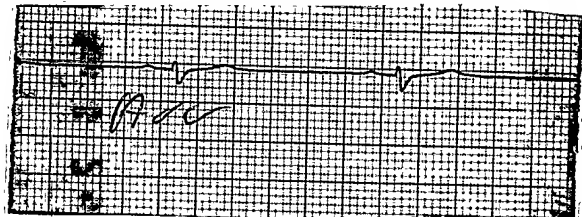
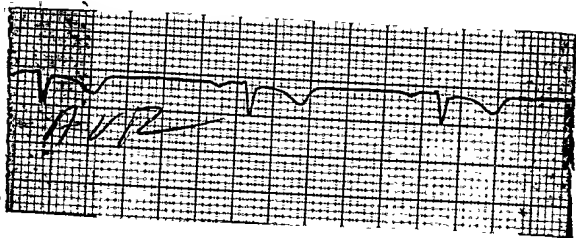
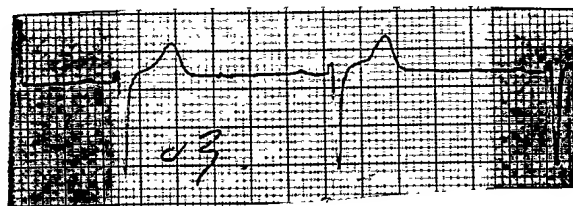
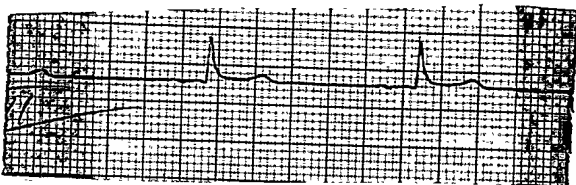
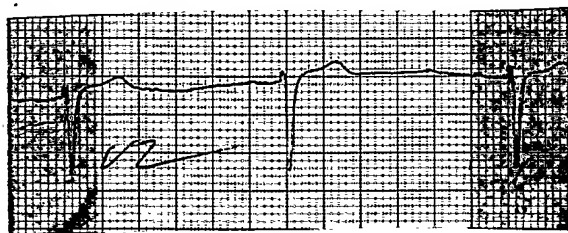
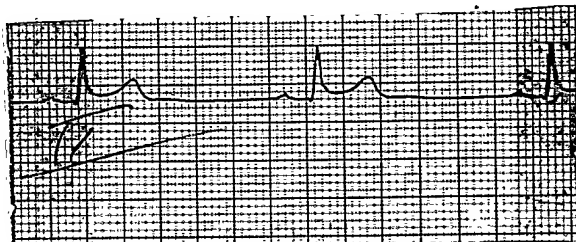
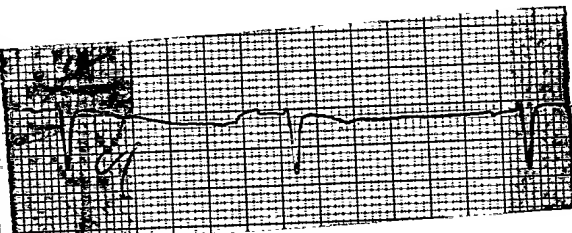
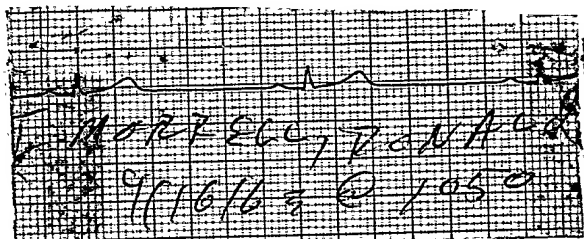
PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:  
1. Sinus bradycardia

(Continue on reverse)

NO. ECG	SIGNATURE <u>G MITCHELL/js</u>	TITLE <u>LT MC USNR</u>	DATE <u>4/16/63</u>
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility) <u>MORRELL DONALD C FBI</u>		REGISTER NO.	WARD NO. <u>ST-CL</u>





CLINICAL RECORD						ELECTROCARDIOGRAPHIC RECORD		PREVIOUS ECG	
CLINICAL IMPRESSION						MEDICATION		<input type="checkbox"/> YES	<input type="checkbox"/> NO
								<input type="checkbox"/> EMERGENCY	<input type="checkbox"/> BEDSIDE
								<input type="checkbox"/> ROUTINE	<input type="checkbox"/> AMBULANT
AGE 43	SEX M	RACE	HEIGHT 5-7	WEIGHT 160	B. P.	SIGNATURE OF WARD PHYSICIAN 5/4/62@ 1055			DATE
RHYTHM Normal sinus						AXIS DEVIATION (QRS)		RATES	
						P WAVES /30		AURIC. VENT. 55	
INTERVALS									
PR .20 QRS .08 QT .36						Normal			
QRS COMPLEXES									
Normal									
RS-T SEGMENT						T WAVES			
Normal						Normal			
UNIPOLAR EXTREMITY LEADS (Specify)									

PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

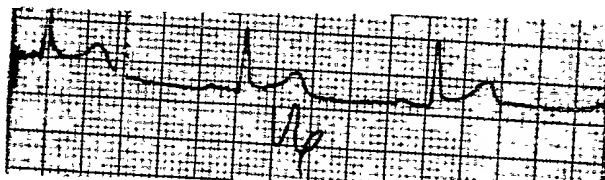
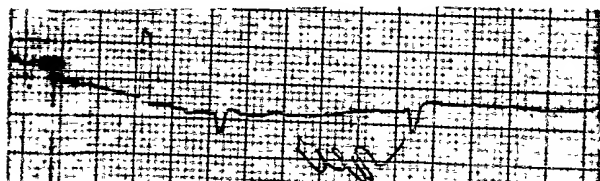
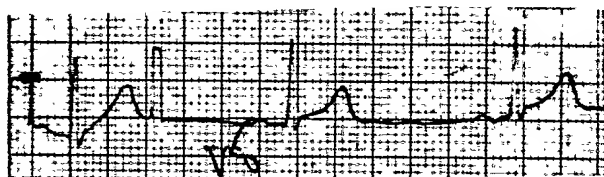
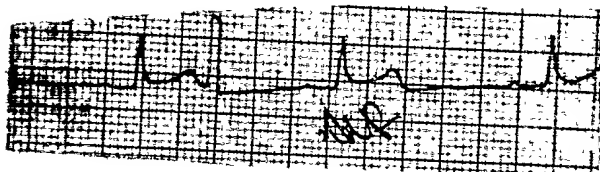
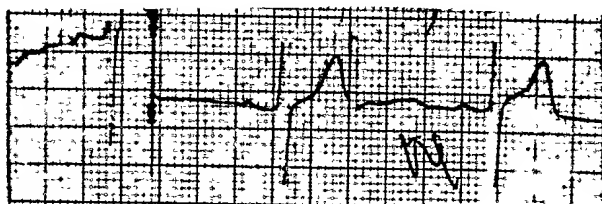
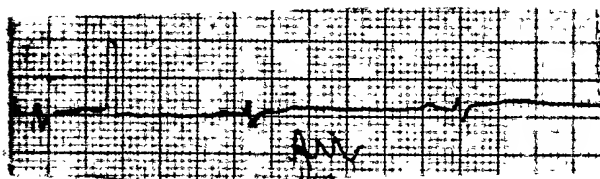
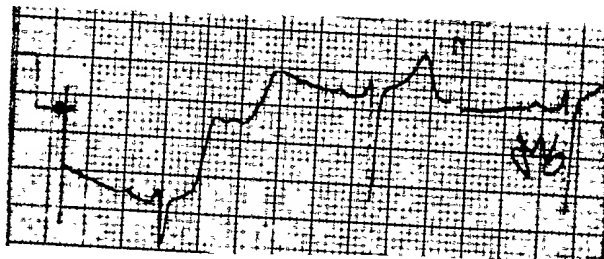
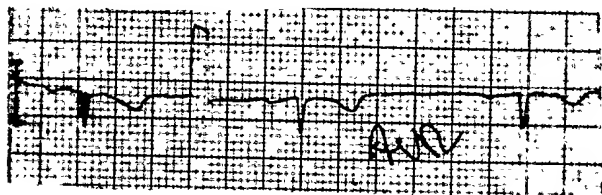
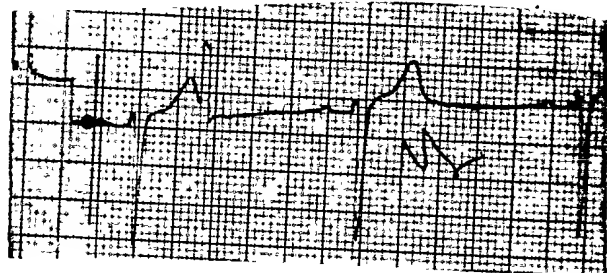
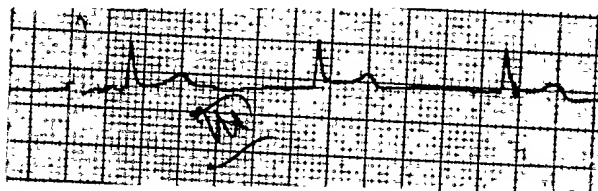
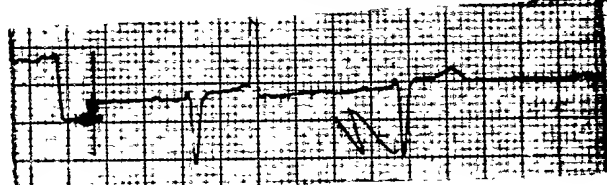
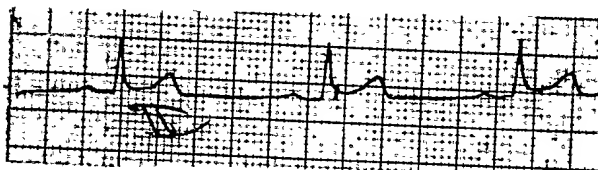
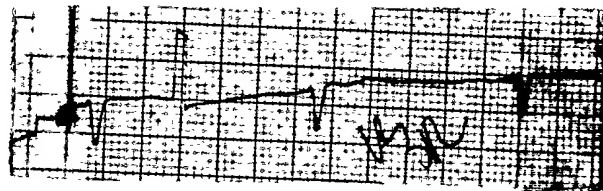
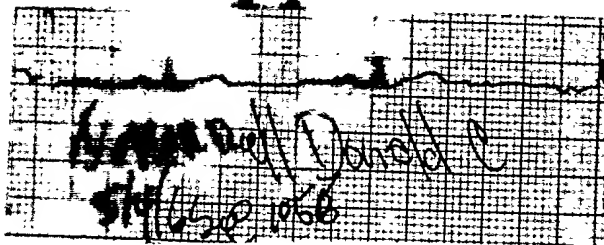
1. Within normal limits
2. No significant change since 6/7/61

(Continue on reverse)

NO. ECG 16934	SIGNATURE D. KETTLER/JS	TITLE LT MC USN	DATE 5/7/62
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)		REGISTER NO.	WARD NO.
MORRELL DONALD C FBI USNH NNMC BETHSEDA, MD			ST. CL.

ELECTROCARDIOGRAPHIC RECORD  
Standard Form 520  
(Attach tracings to S. F. 507)





CLINICAL RECORD						ELECTROCARDIOGRAPHIC RECORD		PREVIOUS ECG		
CLINICAL IMPRESSION						MEDICATION		<input type="checkbox"/> YES	<input type="checkbox"/> NO	
								<input type="checkbox"/> EMERGENCY	<input type="checkbox"/> BEDSIDE	
AGE 42						SEX M		<input type="checkbox"/> ROUTINE		<input type="checkbox"/> AMBULANT
								RACE		DATE
HEIGHT 5-7		WEIGHT 158		B. P.		SIGNATURE OF WARD PHYSICIAN		6/7/61 @ 1115		
RHYTHM Sinus						AXIS DEVIATION (QRS) + 70		RATES AURIC. VENT. 60		
INTERVALS PR .18 QRS .08						P WAVES Normal				
QRS COMPLEXES										
RS-T SEGMENT						T WAVES				
UNIPOLAR EXTREMITY LEADS (Specify)										

PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

1. Within normal limits
2. No significant change since 8/2/60

(Continue on reverse)

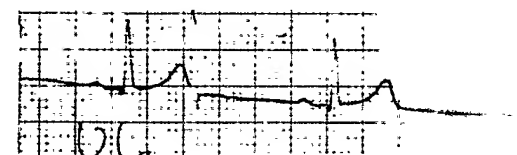
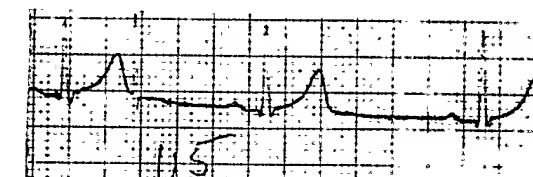
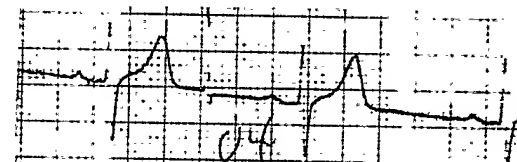
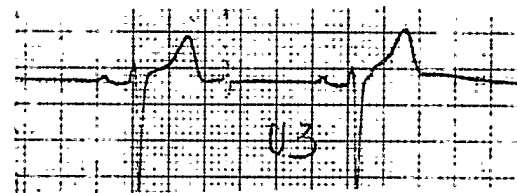
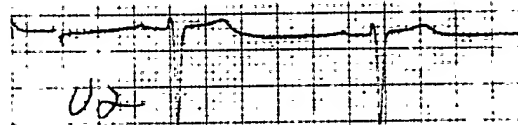
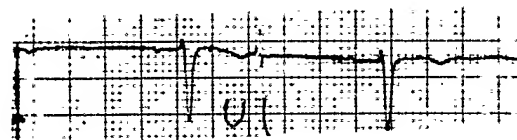
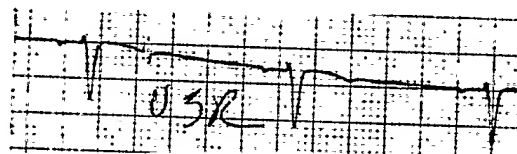
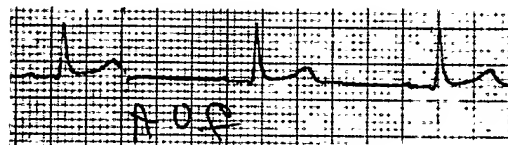
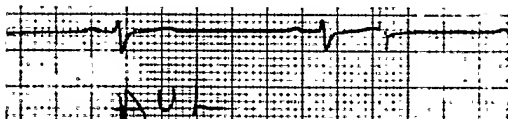
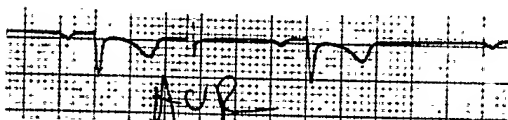
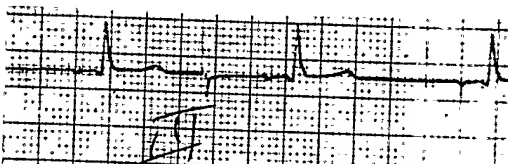
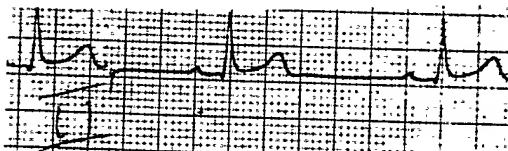
NO. ECG 16934	SIGNATURE B.I. SHUGCOLL	TITLE LCDR MC USN	DATE 6/8/61
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)		REGISTER NO.	WARD NO.
			ST. CL.

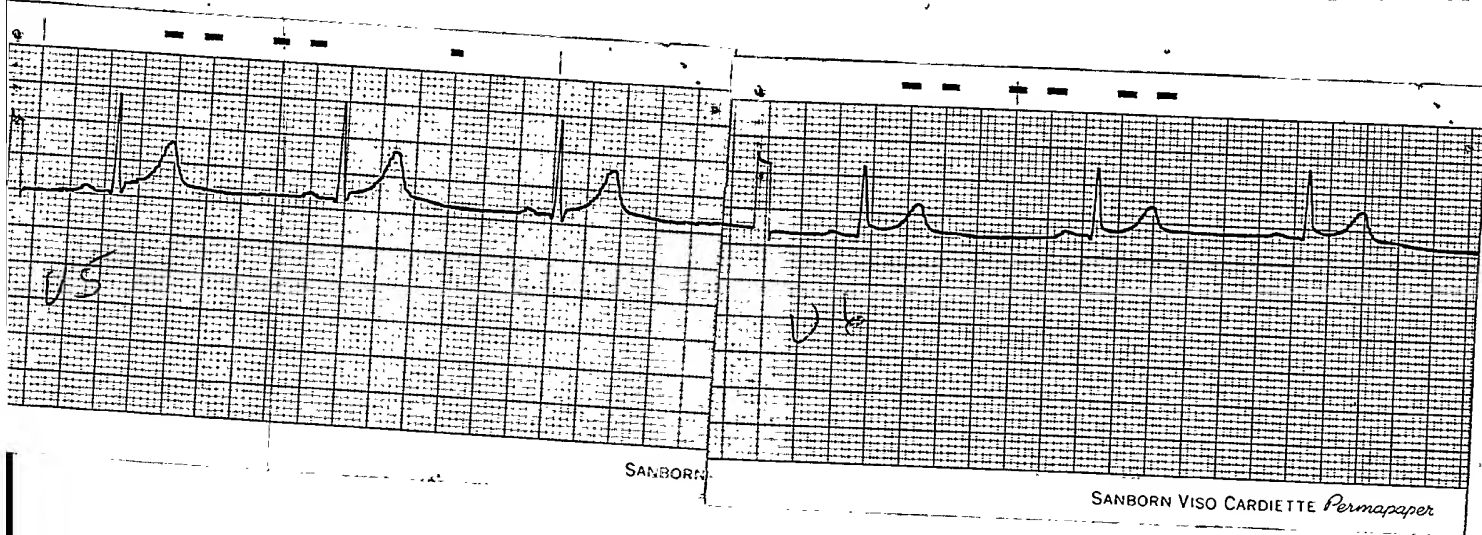
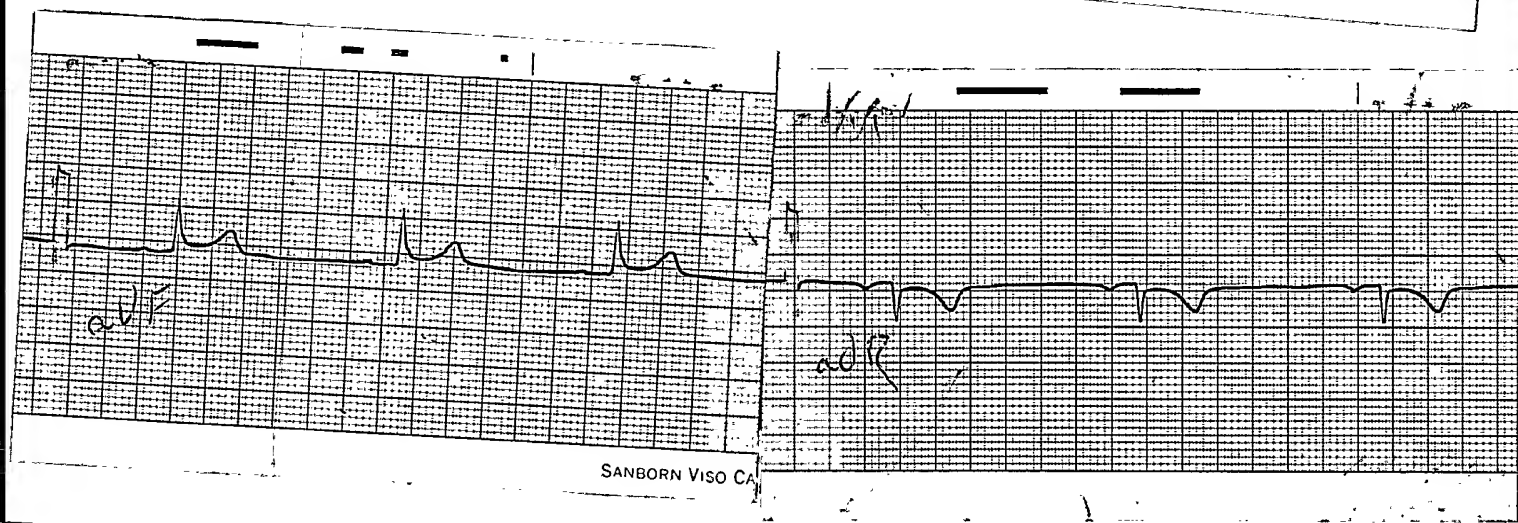
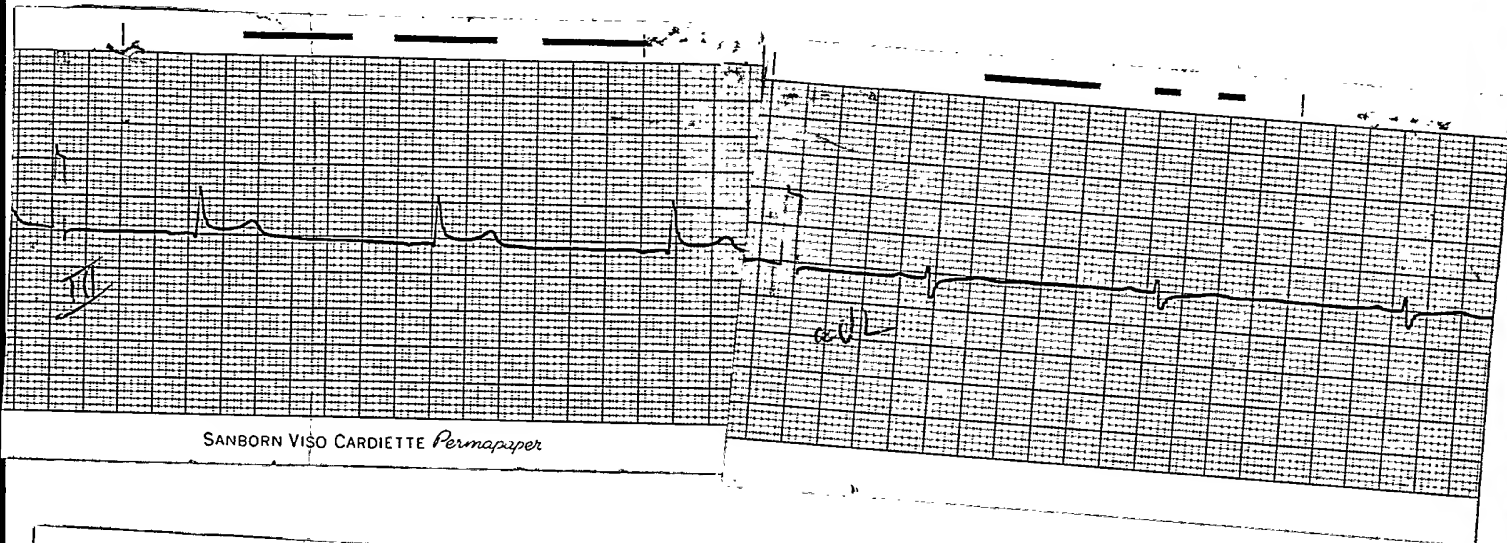
MORRELL DOANLD C FBI  
USNH NNMC BETHSEDA, MD

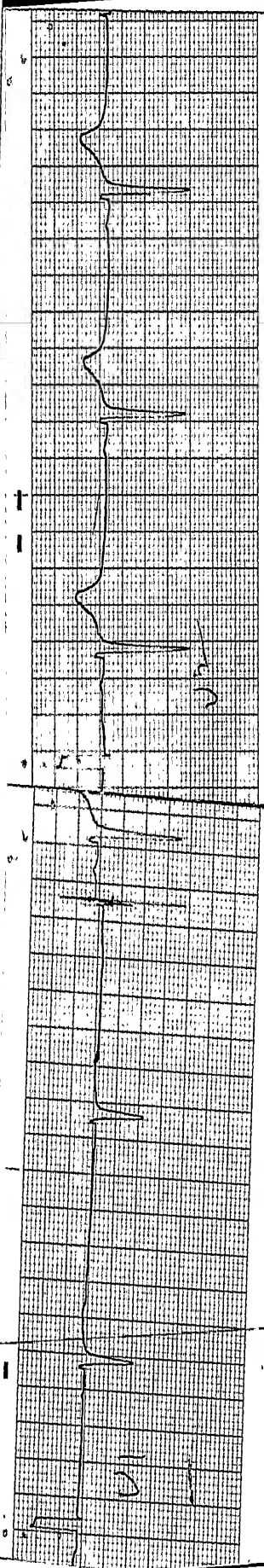
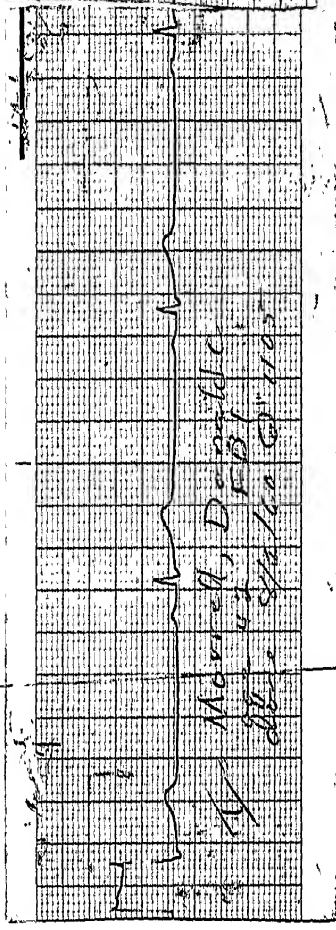
ENCLOSURE

ELECTROCARDIOGRAPHIC RECORD  
Standard Form 520  
520-103  
(Attach tracings to S. F. 507)

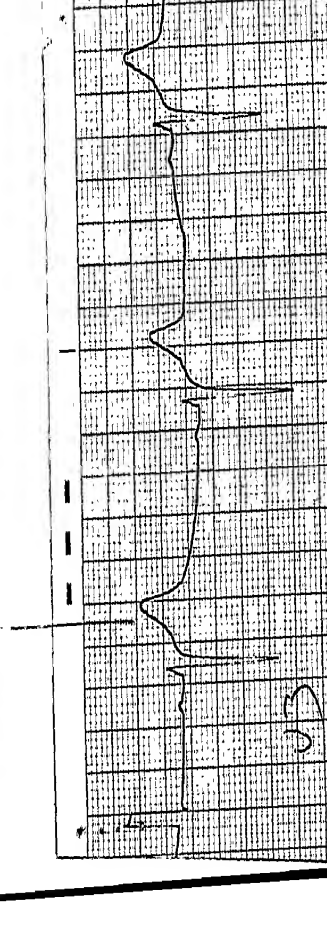
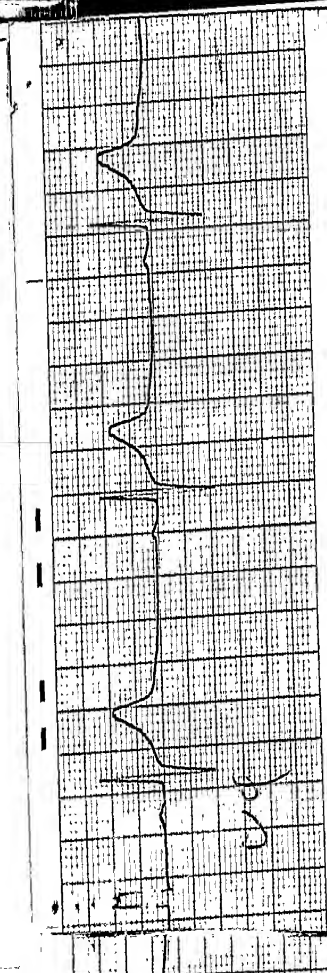
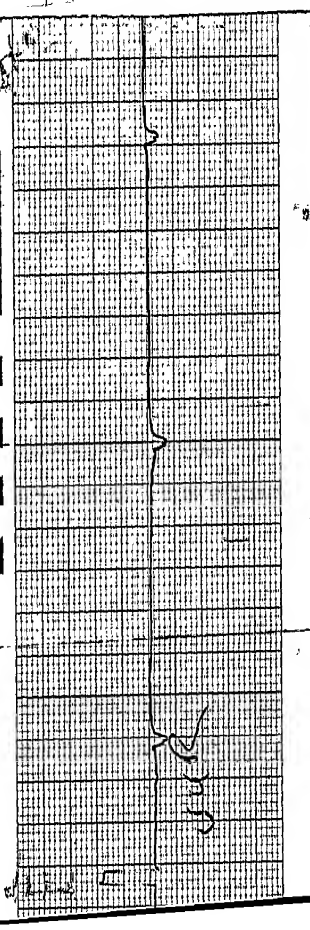
*T. Marshall, Donald*  
*age 42, FBI*  
*6-2-68 @ 11/16*





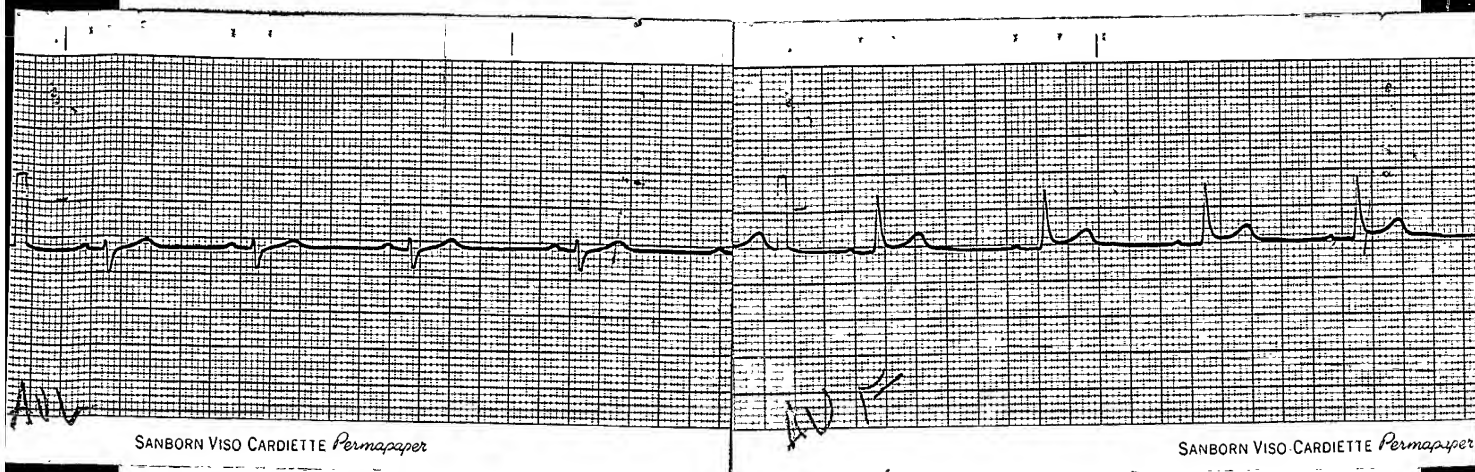
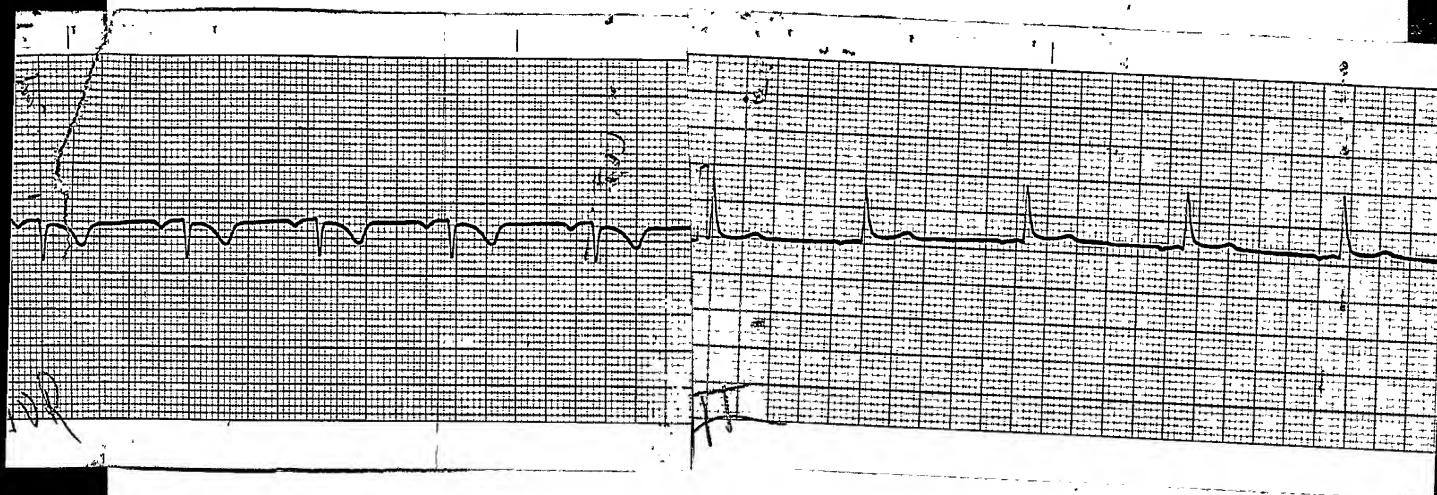
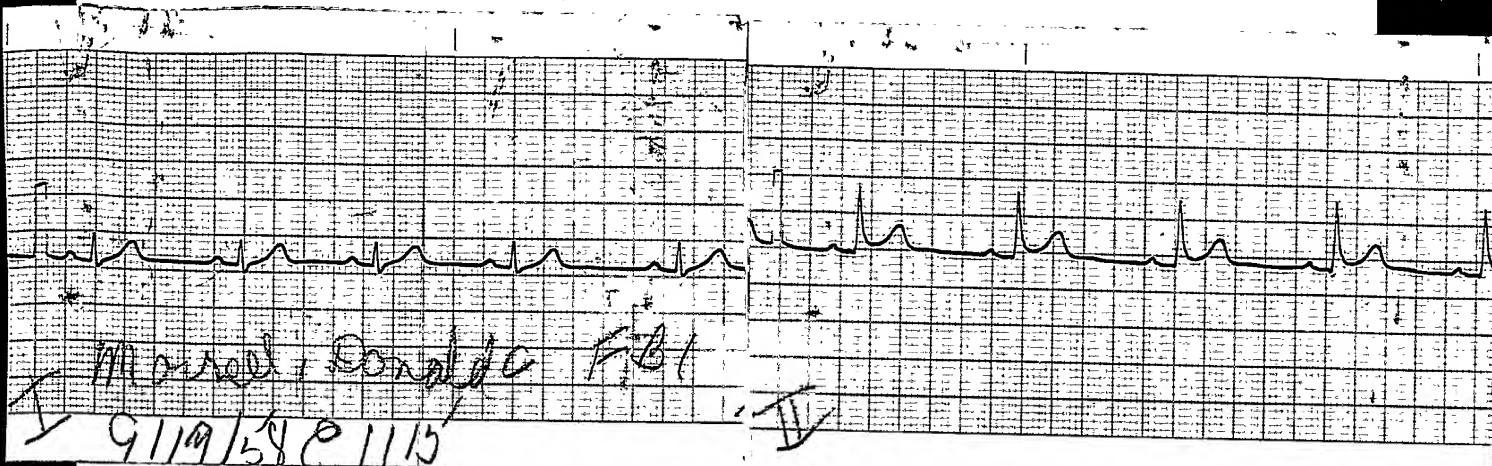


ARDIETTE Penapaper



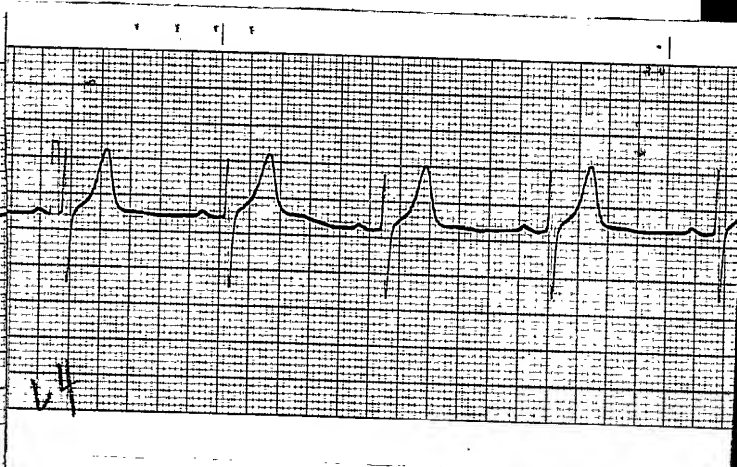
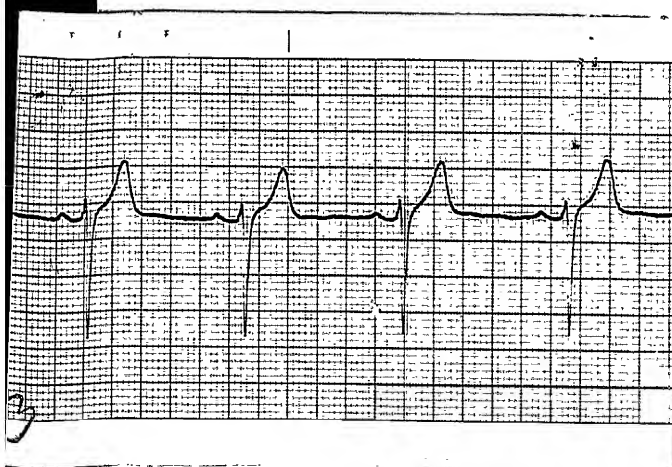
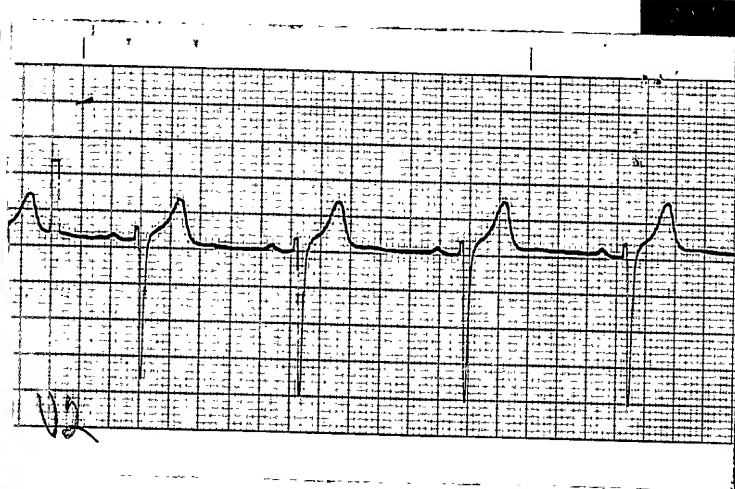
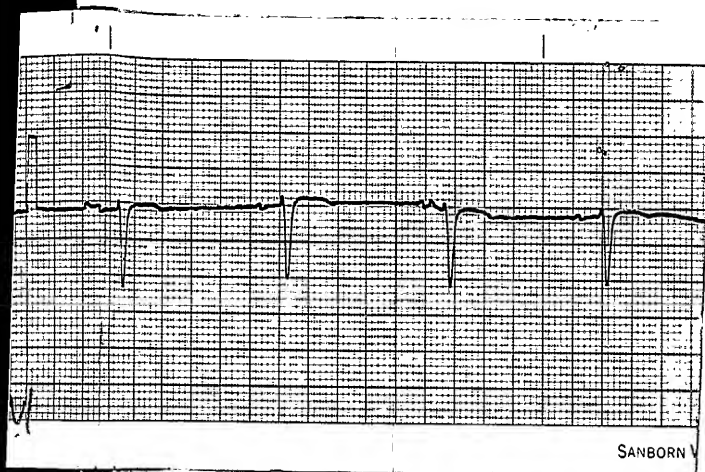
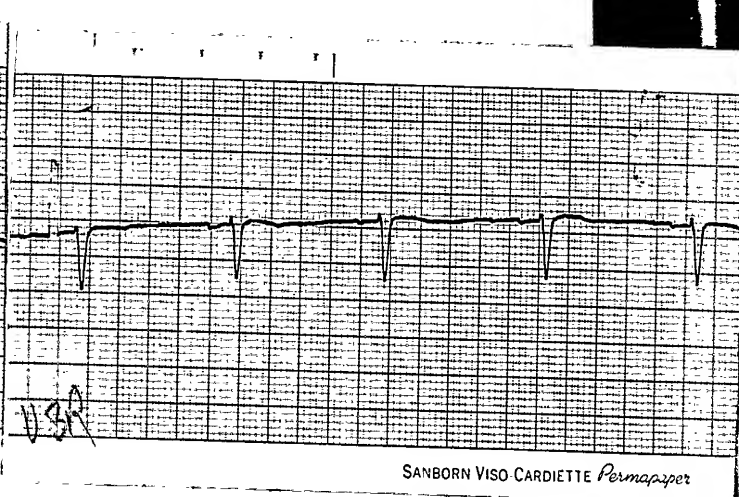
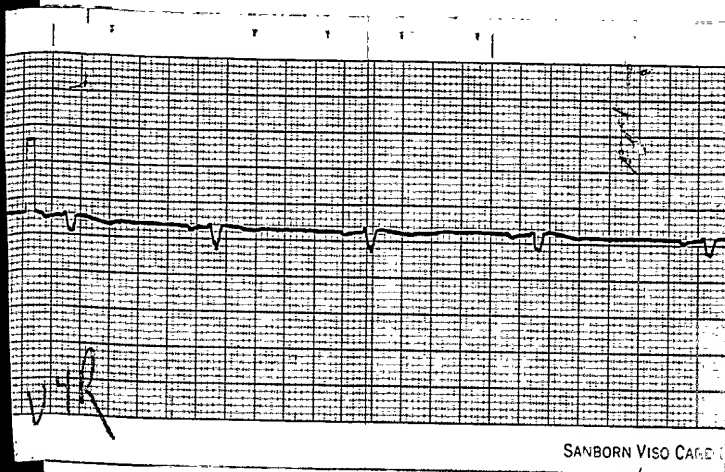




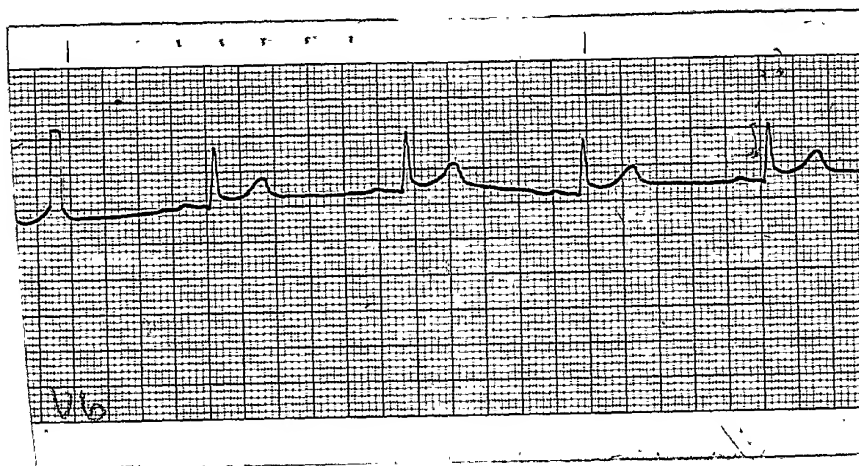
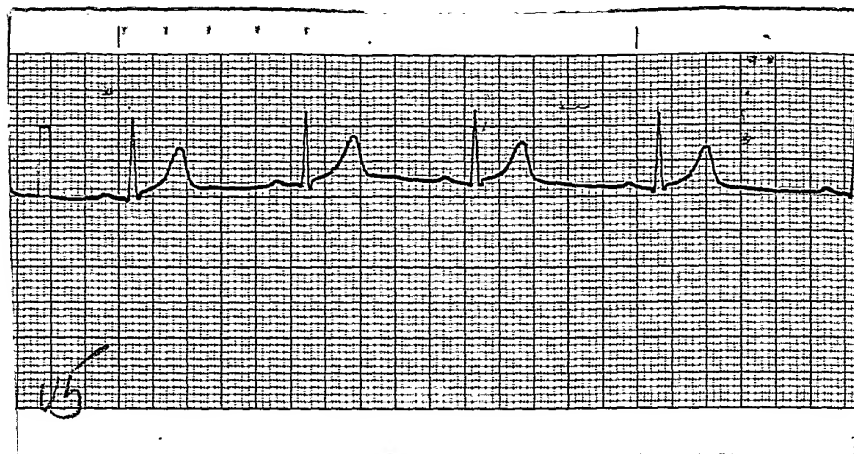


SANBORN VISO CARDIETTE Permapaper

SANBORN VISO CARDIETTE Permapaper







CLINICAL RECORD					ELECTROCARDIOGRAPHIC RECORD					PREVIOUS ECG	
CLINICAL IMPRESSION					MEDICATION					<input type="checkbox"/> YES <input type="checkbox"/> NO	
										<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT	
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN				DATE	
40	M		67"	157		Dr. Voshell				9-19-58@1115	
RHYTHM Sinus bradycardia						AXIS DEVIATION (QRS) + 70°				RATES AURIC.      VENT. 55	
INTERVALS PR .16      QRS .08      QT						P WAVES					
QRS COMPLEXES											
RS-T SEGMENT						T WAVES					
UNIPOLAR EXTREMITY LEADS (Specify)											
PRECORDIAL LEADS (Specify)											

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

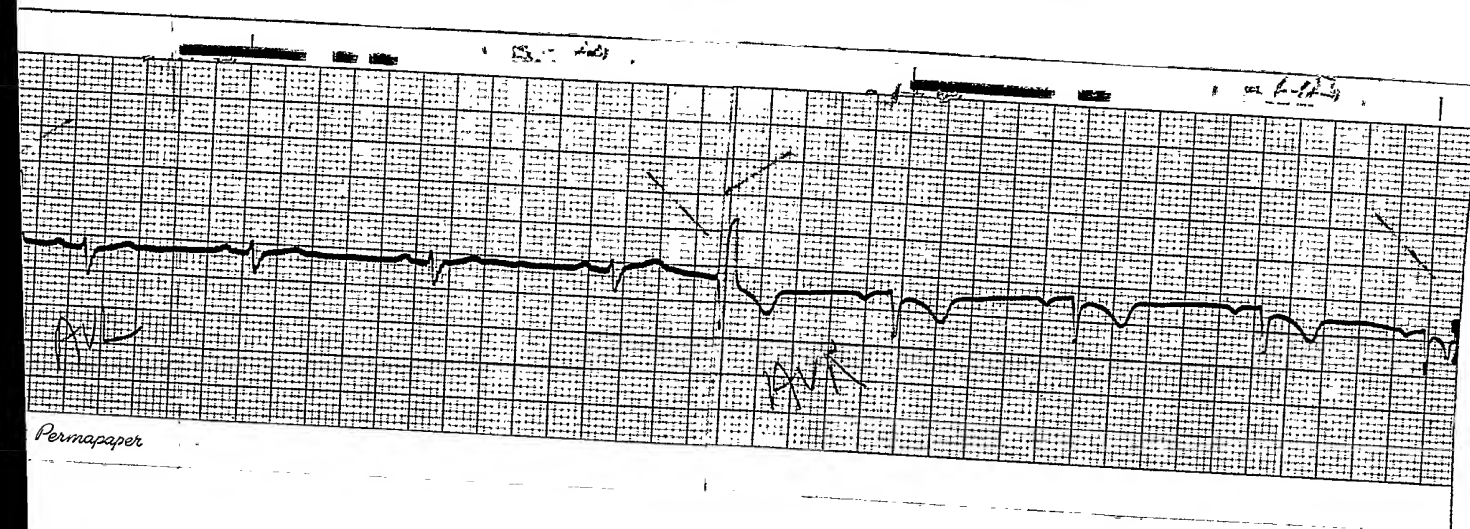
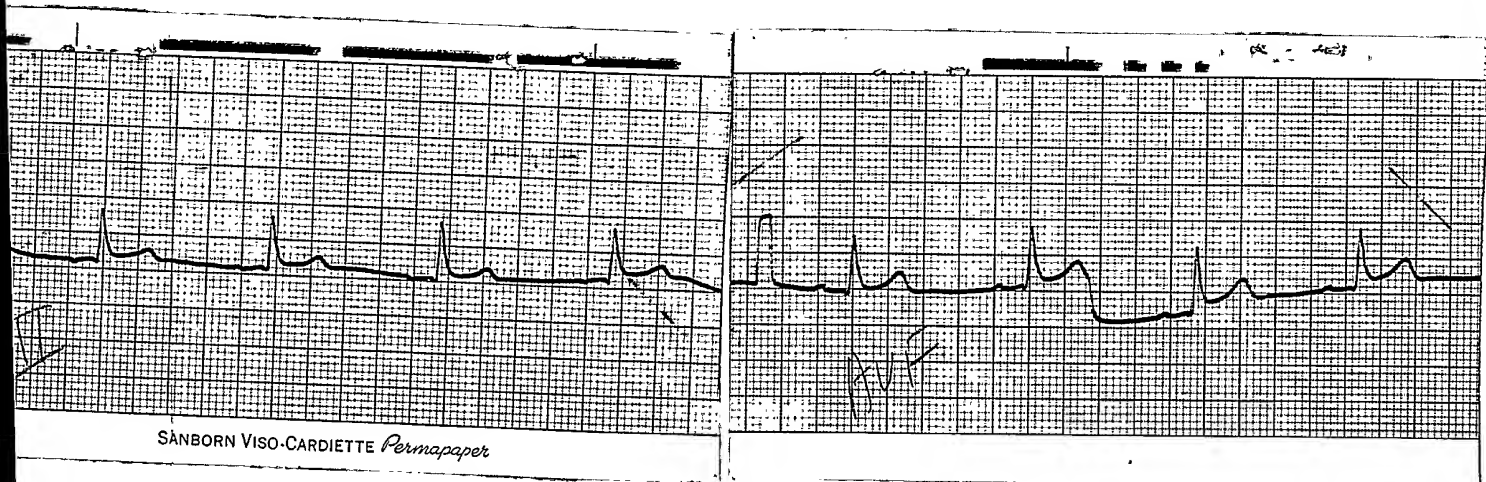
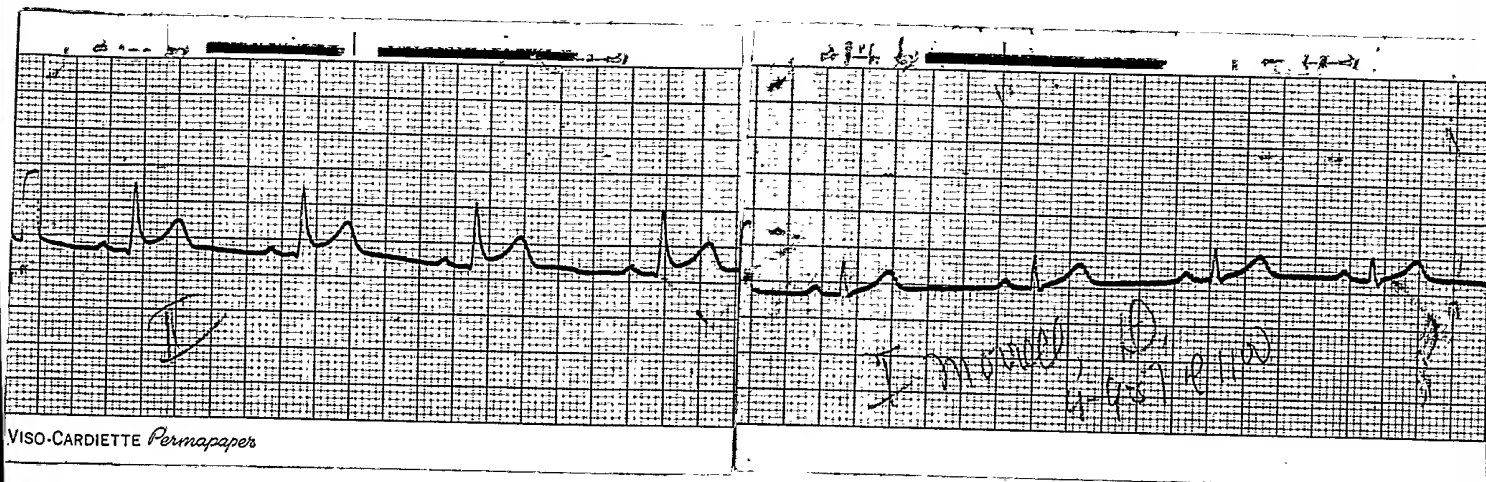
1. Within normal limits.
2. No significant change since 9-12-57.

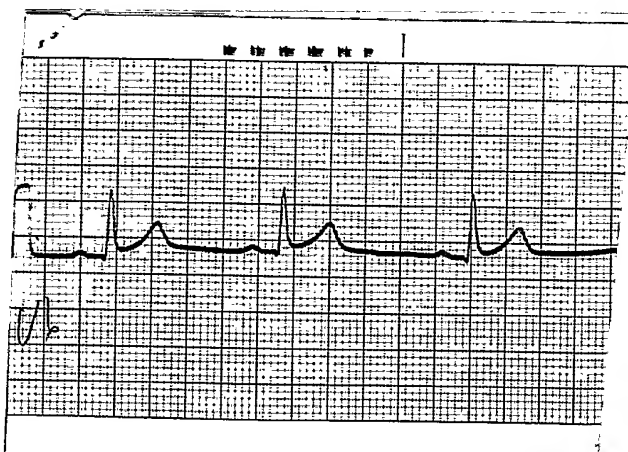
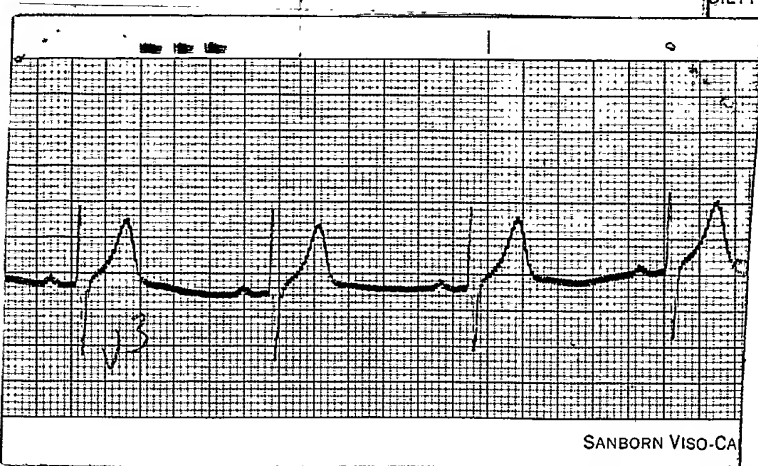
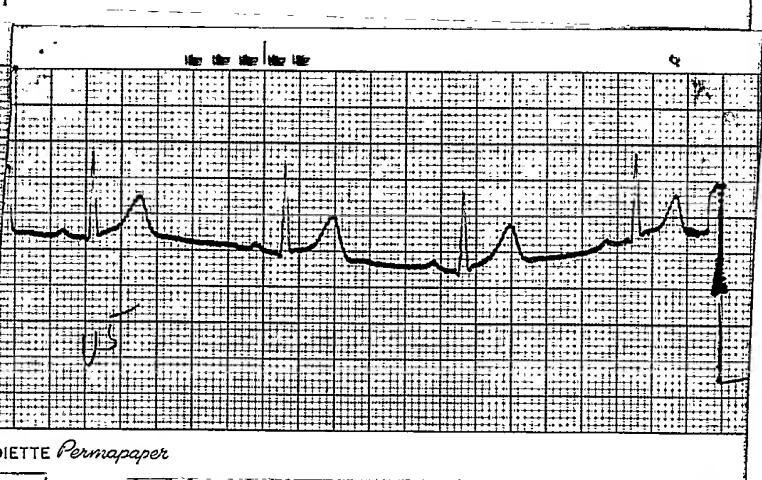
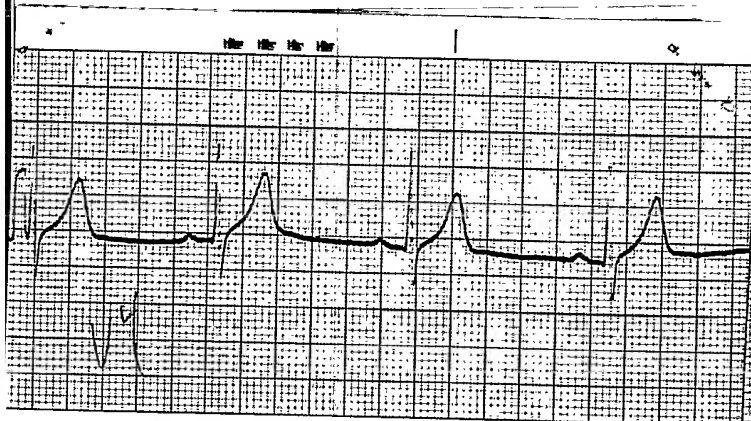
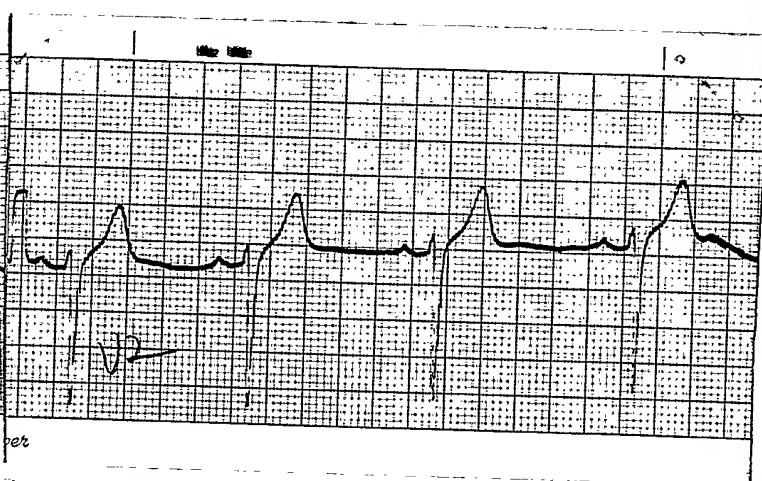
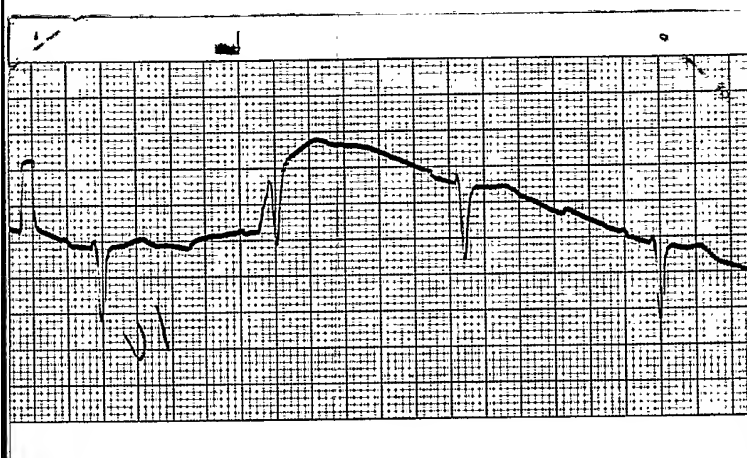
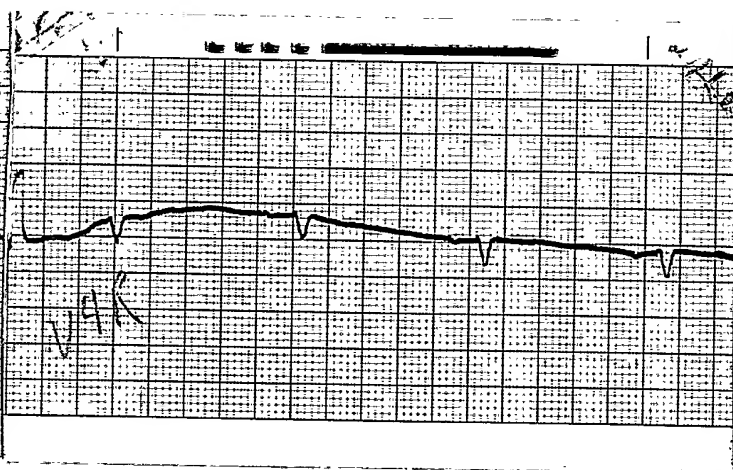
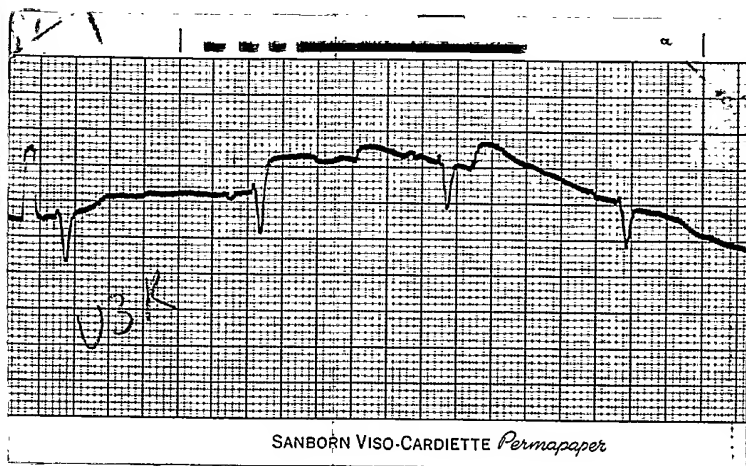
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NO.	SIGNATURE	TITLE	DATE
ECG 16934	G. E. Gorsuch/wzj	LT MC USN	9-19-58
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)		REGISTER NO.	WARD NO.
MORRELL, Donald C.		FBI	ST. Clinic

USNH Bethesda, Md.

ELECTROCARDIOGRAPHIC RECORD  
Standard Form 520  
(Attach tracings to S. F. 507)





CLINICAL RECORD						ELECTROCARDIOGRAPHIC RECORD		PREVIOUS ECG	
CLINICAL IMPRESSION						MEDICATION		<input type="checkbox"/> YES <input type="checkbox"/> NO	
								<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT	
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN			DATE
39	M		68	160		DR. JOHNSTON			9 9 57@1100
RHYTHM						AXIS DEVIATION (QRS)		RATES	
Normal sinus						none 60 degrees		AURIC.    VENT. 70	
INTERVALS						P WAVES			
PR .16    QRS .07    QT .34									
QRS COMPLEXES									
RS-T SEGMENT						T WAVES			
early repolarization									
UNIPOLAR EXTREMITY LEADS (Specify)									
PRECORDIAL LEADS (Specify)									

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

1. Within normal limits
2. No significant change since 10 12 56

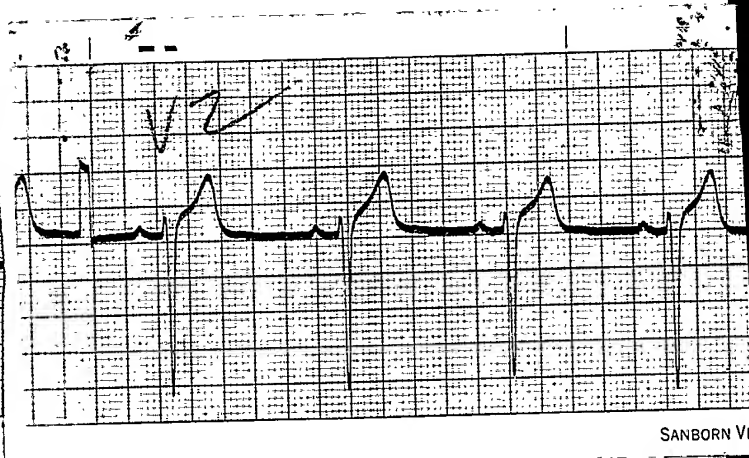
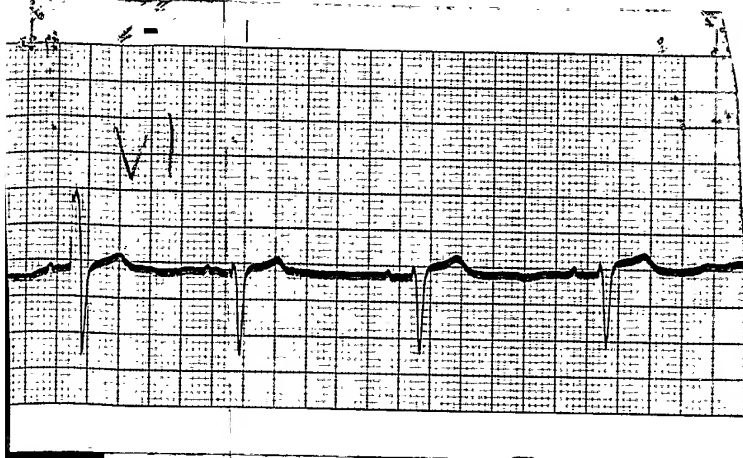
(Continue on reverse)

NO.	SIGNATURE	TITLE	DATE
ECG 16934	DR. DREIZEN /bas	LT MC USNR	9 12 57
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)		REGISTER NO.	WARD NO.
			ST. CLINIC

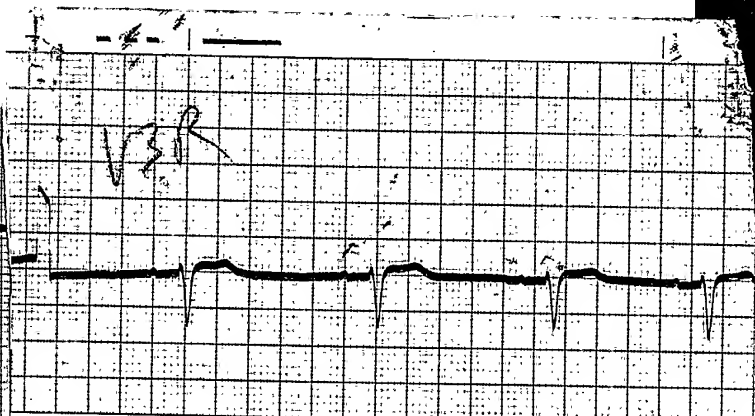
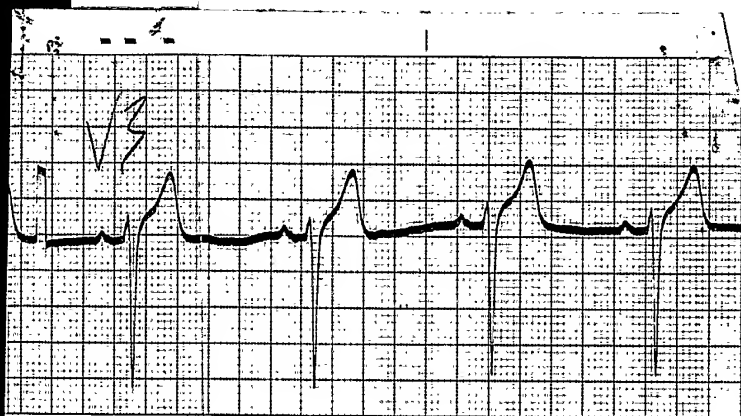
MORRELL, DONALD C.    FBI  
NNMC USNH BETHESDA, MD.

ELECTROCARDIOGRAPHIC RECORD  
Standard Form 520  
(Attach tracings to S. F. 507)

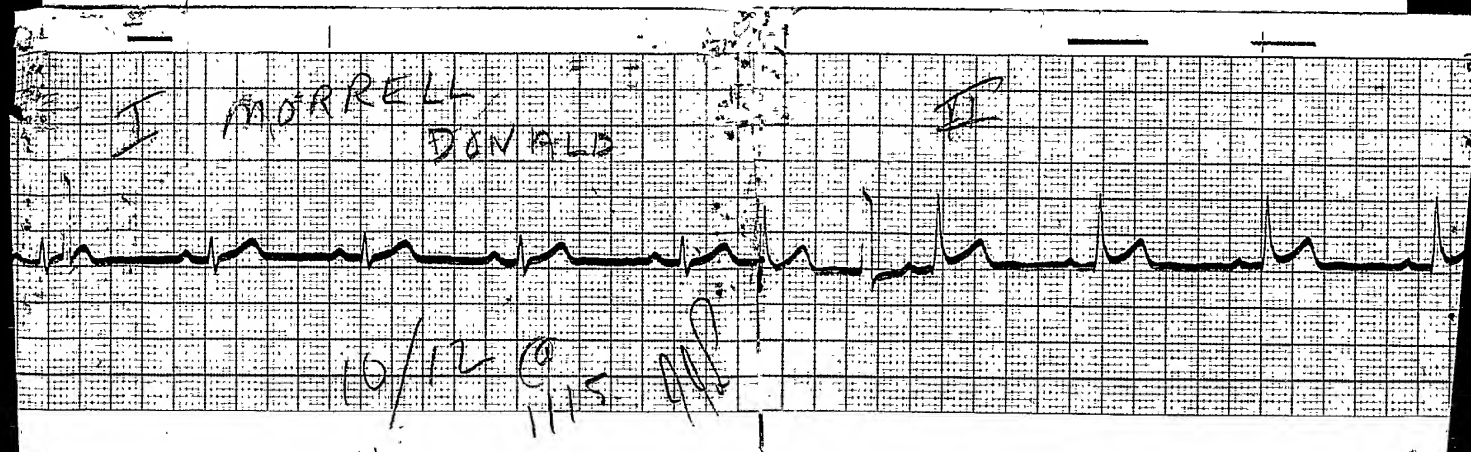
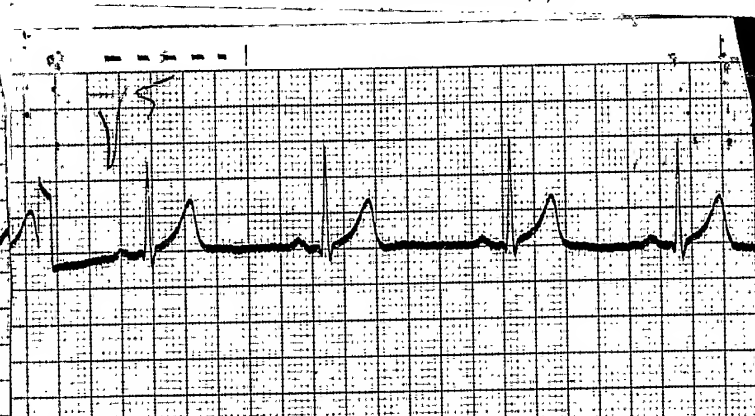
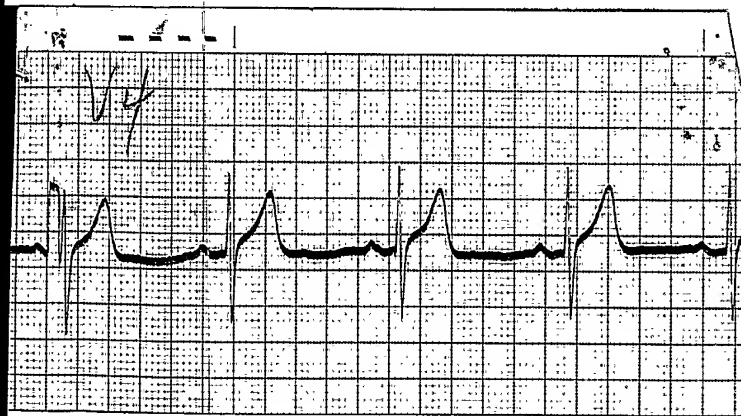


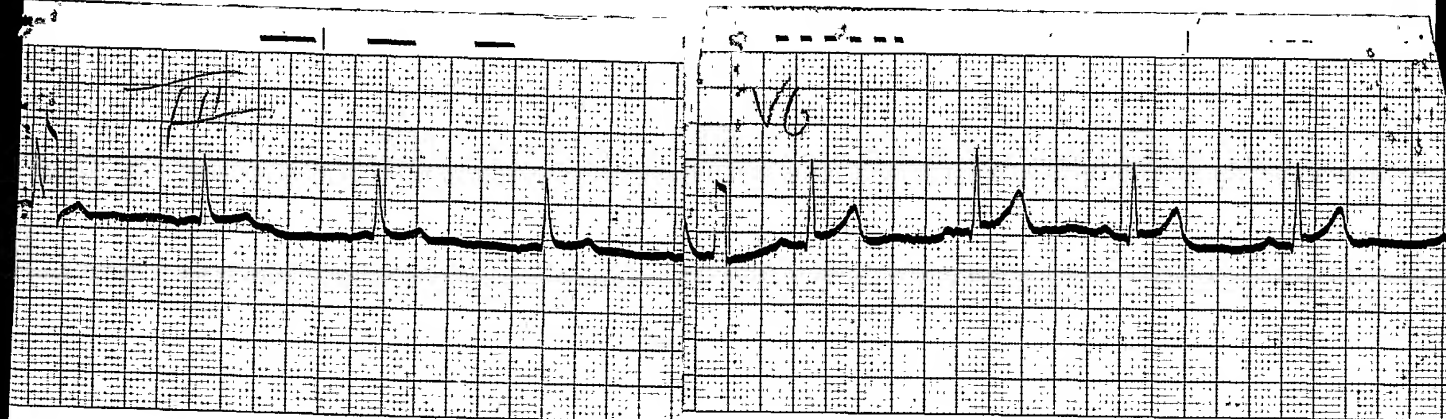
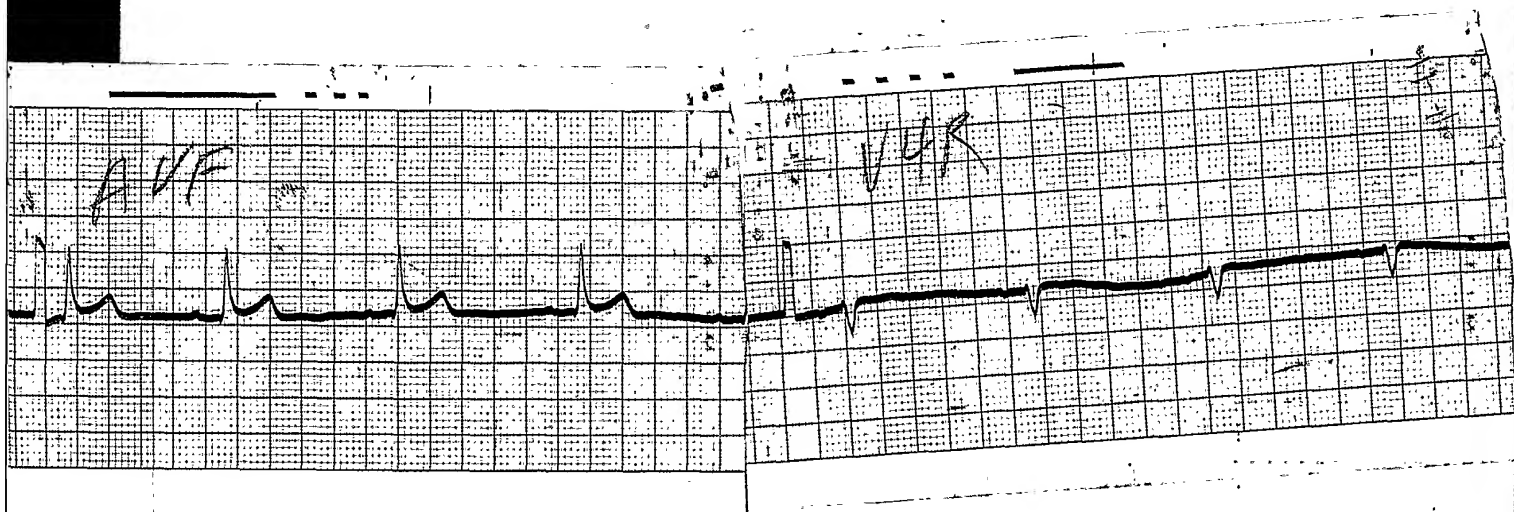
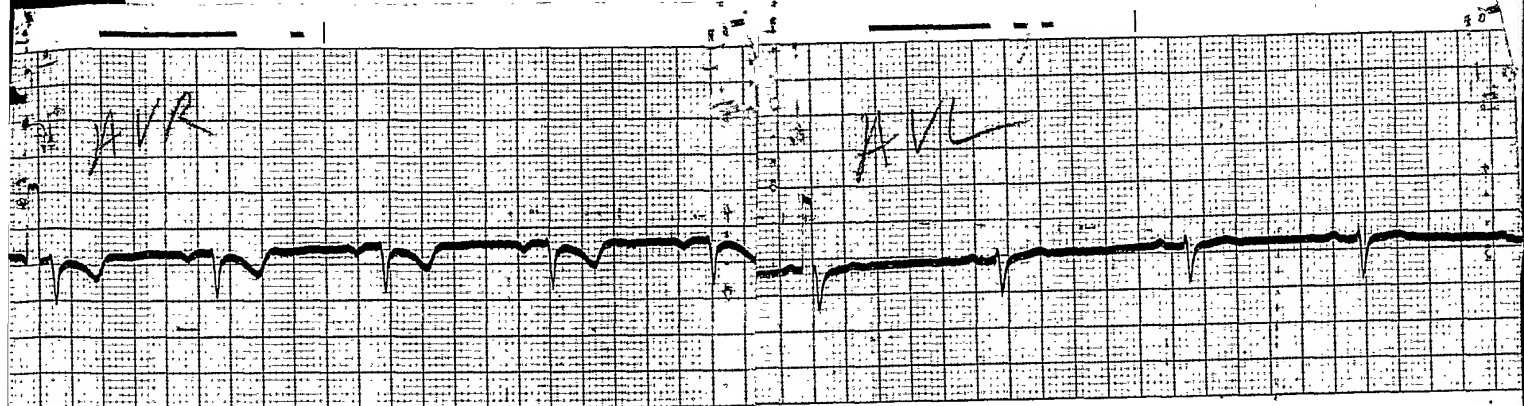


SANBORN VIS




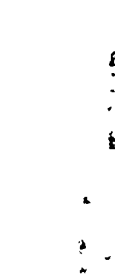

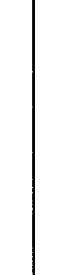


SANBORN VISO-CARDIETTE Permapaper





SANBORN VISO-CARDIETTE *Permapaper*

CLINICAL RECORD						ELECTROCARDIOGRAPHIC RECORD		PREVIOUS ECG	
CLINICAL IMPRESSION						MEDICATION		<input type="checkbox"/> YES <input type="checkbox"/> NO	
								<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT	
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN			DATE
38	M		68	165		DR. JOHNSTON			10/12/56°1115
RHYTHM						AXIS DEVIATION (QRS)		RATES	
Normal Sinus						Normal		AURIC.    VENT.    60	
INTERVALS						P WAVES			
PR .20    QRS .06    QT .32									
QRS COMPLEXES									
RS-T SEGMENT						T WAVES			
UNIPOLAR EXTREMITY LEADS (Specify)									
<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">  <p>Lead I</p> </div> <div style="text-align: center;">  <p>Lead II</p> </div> <div style="text-align: center;">  <p>Lead III</p> </div> <div style="text-align: center;">  <p>Lead aVR</p> </div> <div style="text-align: center;">  <p>Lead aVL</p> </div> <div style="text-align: center;">  <p>Lead aVF</p> </div> </div>									
PRECORDIAL LEADS (Specify)									

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

1. Early repolarization
2. Within Normal Limits
3. No significant change

(Continue on reverse)

AA			
NO.	SIGNATURE	TITLE	DATE
ECG 16934	P. DREIZEN/ajb	LT MC USNR	10/13/56
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)		REGISTER NO.	WARD NO.
MORRELL, DONALD C.    FBI			ST clinic

USNH BETHESDA, MD.

ELECTROCARDIOGRAPHIC RECORD  
Standard Form 520  
(Attach tracings to S. F. 507)



CLINICAL RECORD						ELECTROCARDIOGRAPHIC REPORT		PREVIOUS ECG	
CLINICAL IMPRESSION						MEDICATION		<input type="checkbox"/> YES	<input type="checkbox"/> NO
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN		<input type="checkbox"/> EMERGENCY	<input type="checkbox"/> BEDSIDE
37	M		5'8"	160		Dr. Johnston		<input type="checkbox"/> ROUTINE	<input type="checkbox"/> AMBULANT
RHYTHM						AXIS DEVIATION (QRS)		DATE	
Sinus bradycardia						Intermediate		10-12-55 @1100	
INTERVALS						P WAVES		RATES	
PR .20 QRS .08 QT .40								AURIC. VENT. 48	
QRS COMPLEXES									
RS-T SEGMENT						T WAVES			
PRECORDIAL LEADS (Specify)									

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

1. ST vector represents early repolarization.
2. Within normal limits.

NO.	SIGNATURE	TITLE	DATE
ECG 16934	F. H. GARY/nb	LT 10 USNR	10-13-55

MOUNT TRACINGS HERE

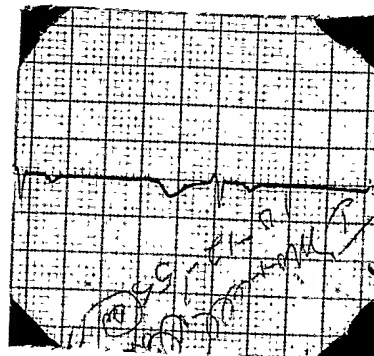
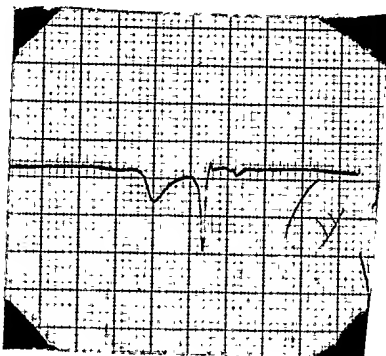
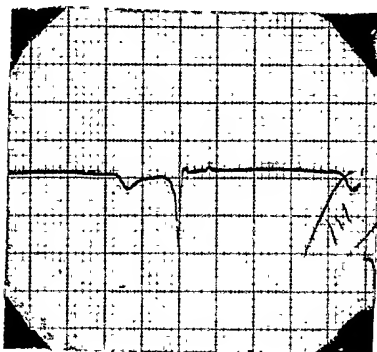
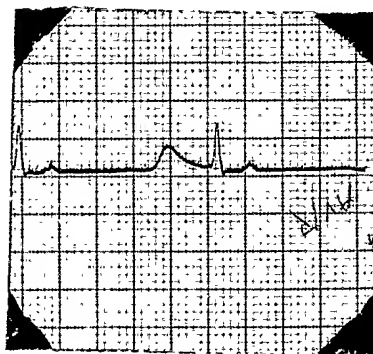
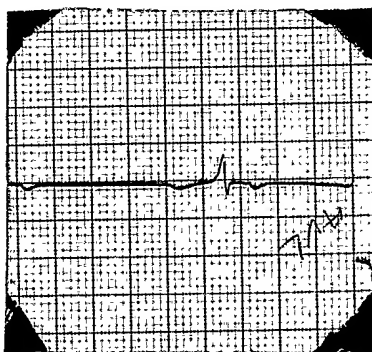
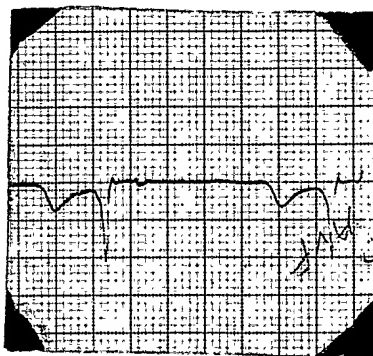
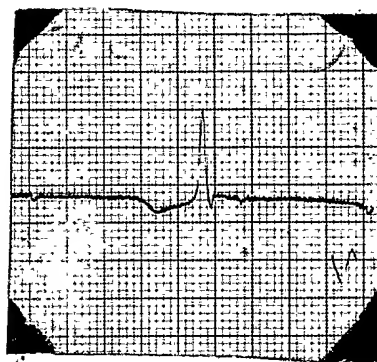
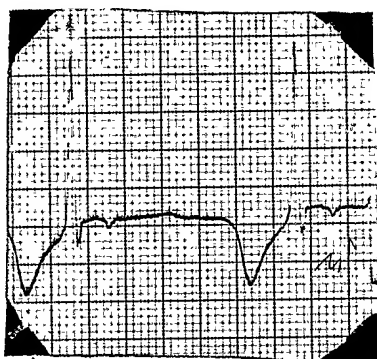
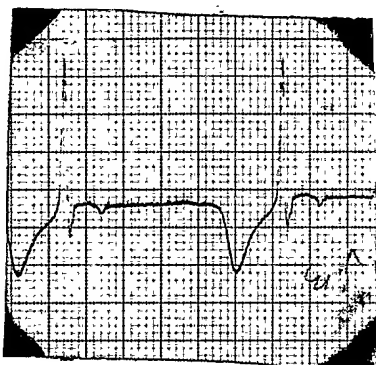
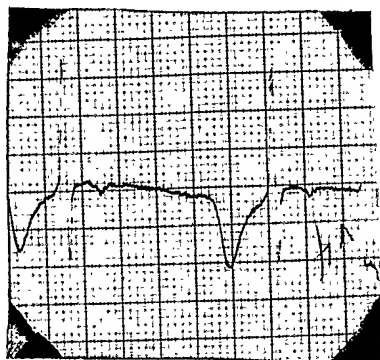
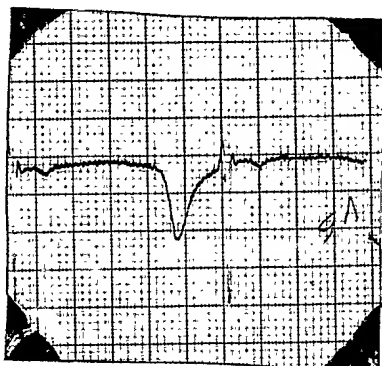
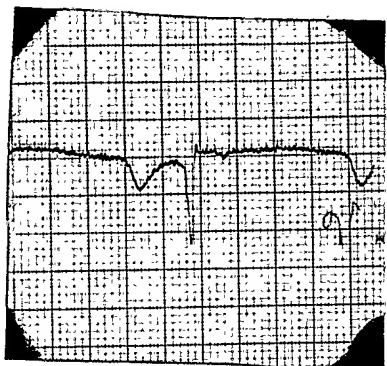
(Continue on reverse)

PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME	REGISTER NO.	WARD NO.
LORELL, Donald C.	F.B.I.	St. Clinic

USNH, BETHESDA, MD.  
(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)

ELECTROCARDIOGRAPHIC REPORT  
Standard Form 520

RS



<b>CLINICAL RECORD</b>						<b>ELECTROCARDIOGRAPHIC RECORD</b>				PREVIOUS ECG <input type="checkbox"/> YES <input type="checkbox"/> NO	
CLINICAL IMPRESSION						MEDICATION				<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT	
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN				DATE	
36	M		68½	163		Dr. Olmsted				10/29/54	
RHYTHM						AXIS DEVIATION (QRS)				RATES	
Sinus bradycardia						Vertical				AURIC. VENT. 59	
INTERVALS						P WAVES					
PR .16 QRS .08 QT											
QRS COMPLEXES											
RS-T SEGMENT						T WAVES					
Slight elevated ST in leads 2 and 3						Upright T in leads 1, 2 and 3.					
UNIPOLAR EXTREMITY LEADS (Specify)											

PRECORDIAL LEADS (Specify)

Upright T in leads V1 thru V6  
Slight elevated ST in leads V5 and V6.

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

Normal electrocardiogram.  
The ST segment displacement has been present previously and is due to early repleorization.

(Continue on reverse)

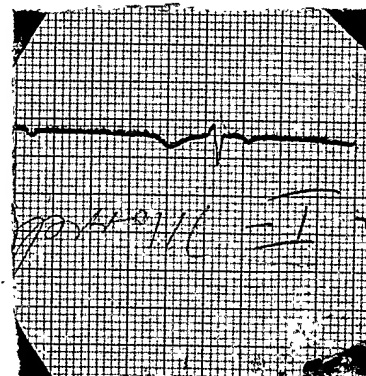
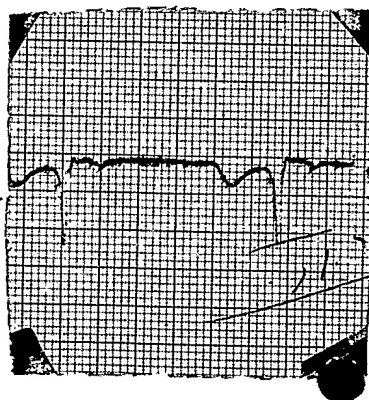
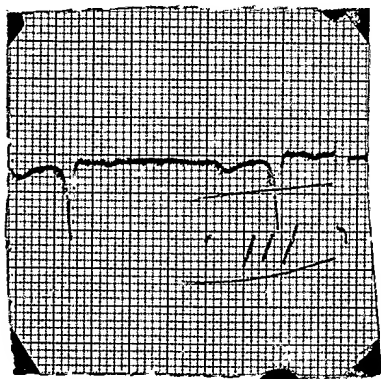
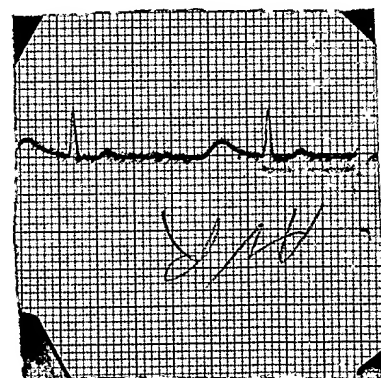
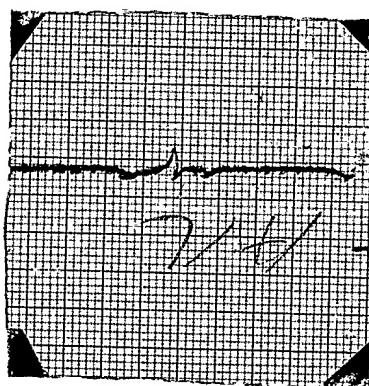
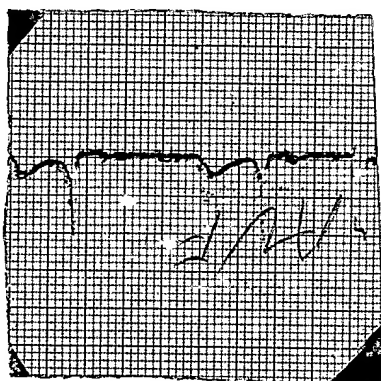
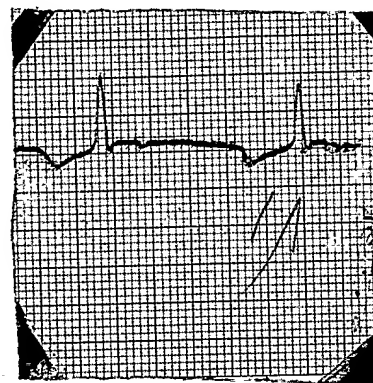
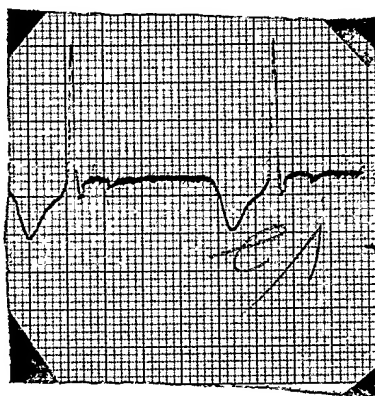
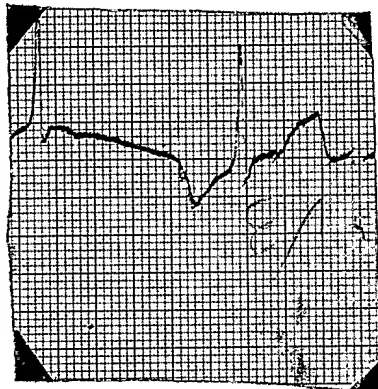
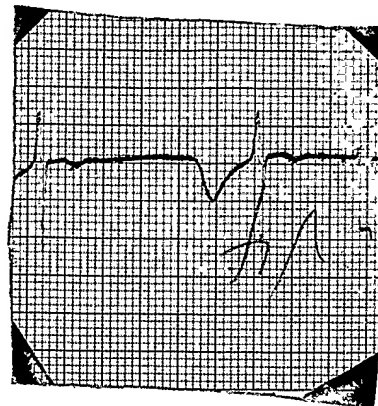
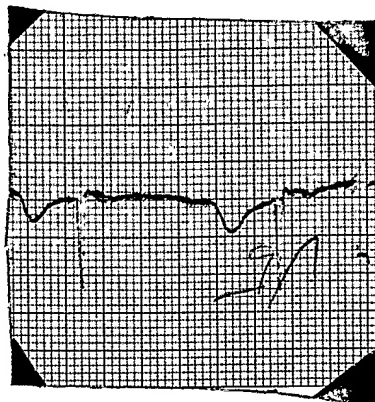
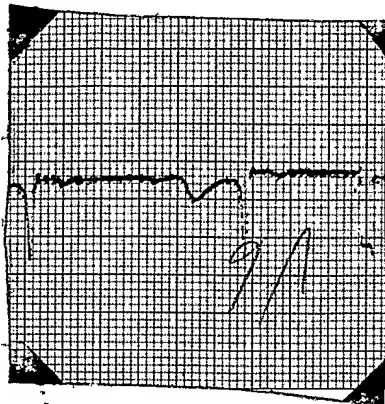
NO.	SIGNATURE	TITLE	DATE
ECG 16934	J. W. Hurst	LT MC USN	10/29/54
PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME		REGISTER NO.	WARD NO.
MORRELL, Donald C.		FRT	ST Clinic

USNH BETHESDA, MARYLAND  
(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)

ELECTROCARDIOGRAPHIC RECORD

Standard Form 520

(Attach tracings to S. F. 507)



<b>CLINICAL RECORD</b>						<b>ELECTROCARDIOGRAPHIC RECORD</b>				PREVIOUS ECG <input type="checkbox"/> YES <input type="checkbox"/> NO	
CLINICAL IMPRESSION						MEDICATION				<input type="checkbox"/> EMERGENCY <input type="checkbox"/> ROUTINE	<input type="checkbox"/> BEDSIDE <input type="checkbox"/> AMBULANT
AGE	SEX	RACE	HEIGHT	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN				DATE	
RHYTHM SINUS BRADYCARDIA & ARRHYTHMIA						AXIS DEVIATION (QRS) NORMAL				RATES AURIC. VENT. 54	
INTERVALS PR .16 QRS .08 QT .38						P WAVES NORMAL					
QRS COMPLEXES											
RS-T SEGMENT						T WAVES					
UNIPOLAR EXTREMITY LEADS (Specify)											

PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

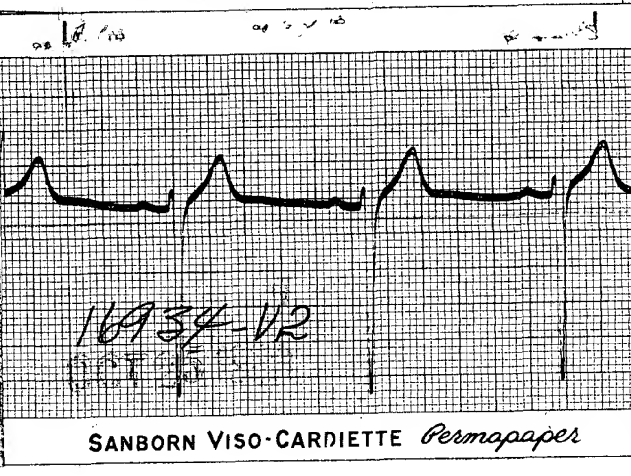
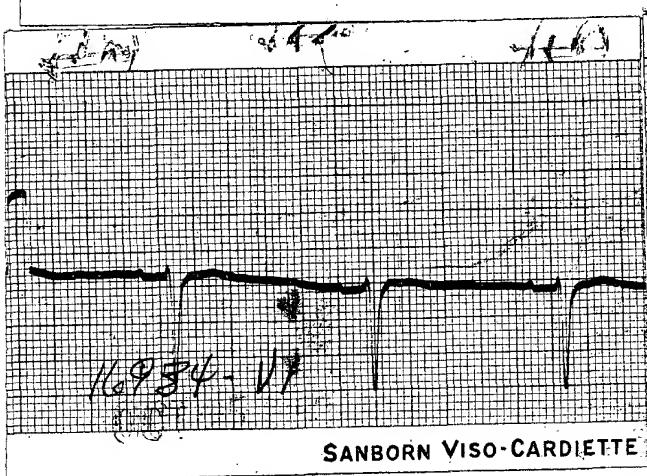
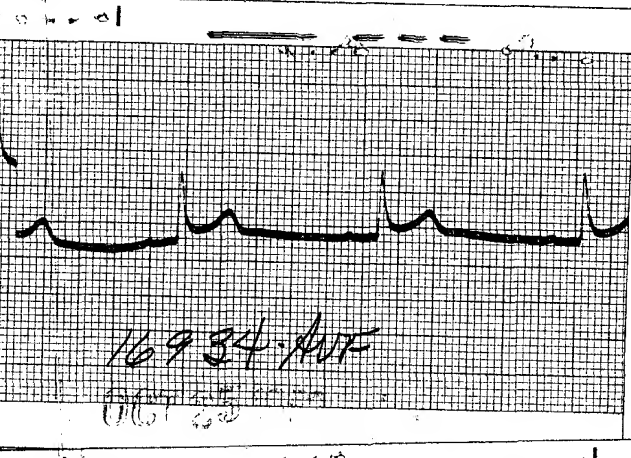
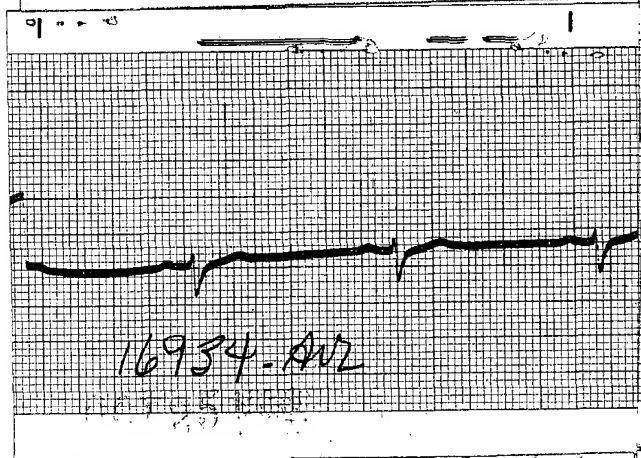
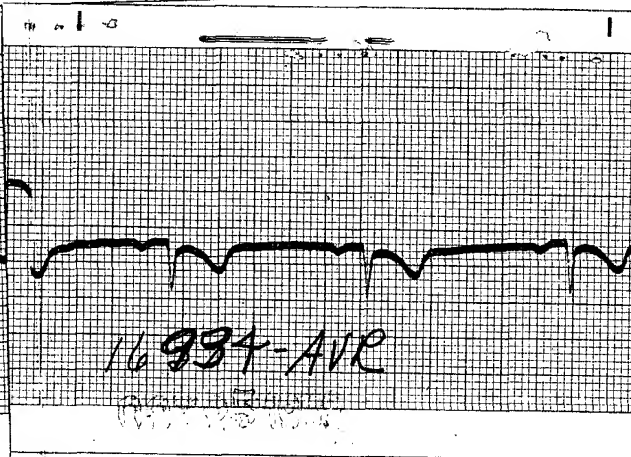
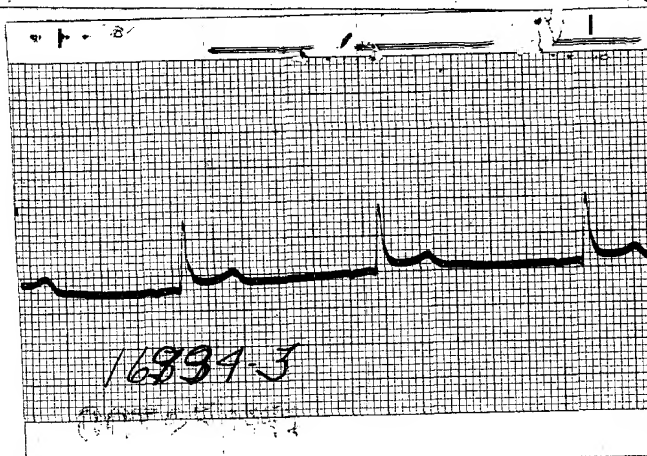
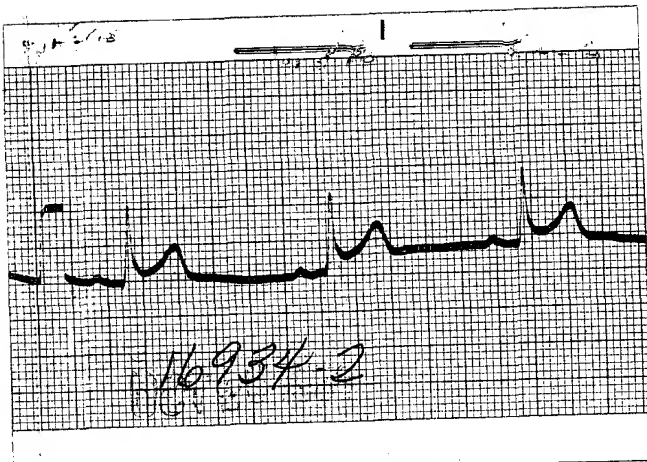
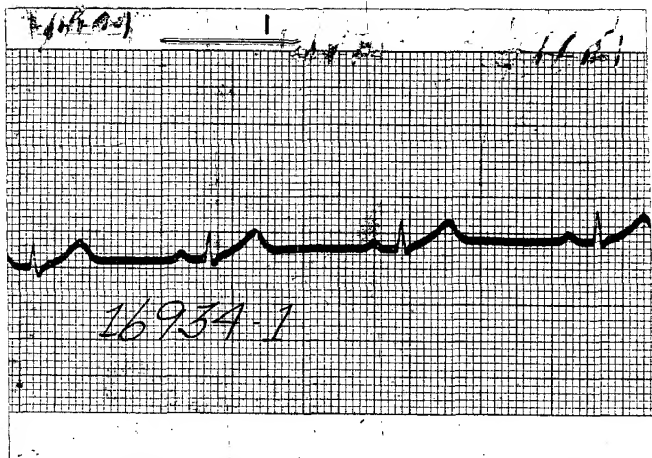
CONCLUSION: WITHIN NORMAL LIMITS.

(Continue on reverse)

NO. ECG 16934	SIGNATURE DR. F. A. SPARKS	TITLE LT MC USN	DATE 10-26-53
PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME NORRELL, DONALD C.		REGISTER NO. FBI	WARD NO. 3T CLINIC

USNH, HAMS, BETHLEDA, MD.  
(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)

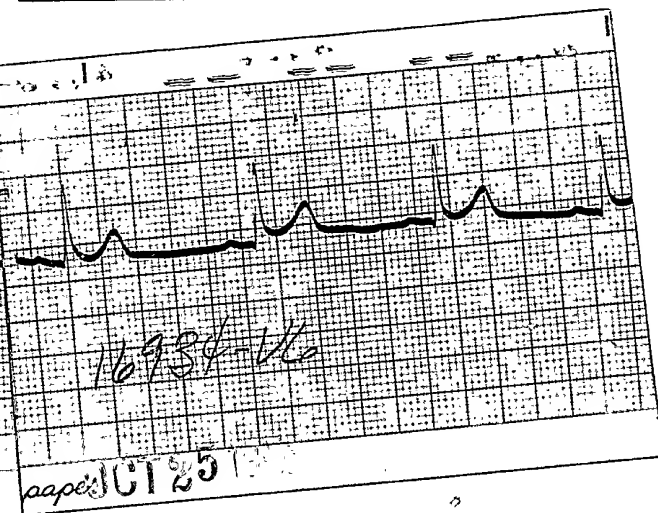
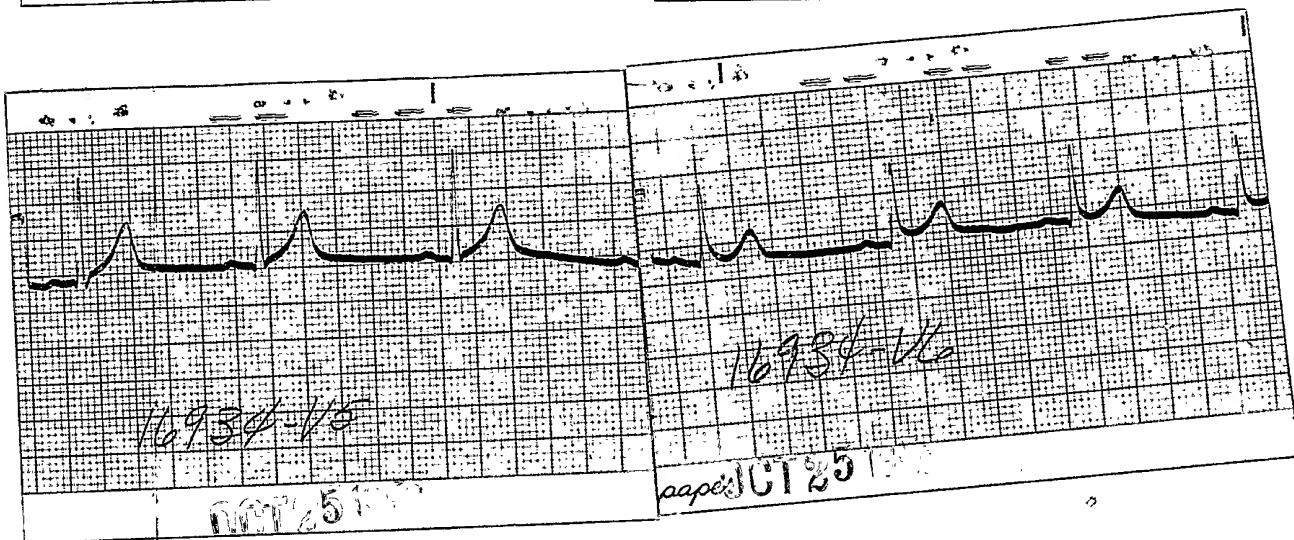
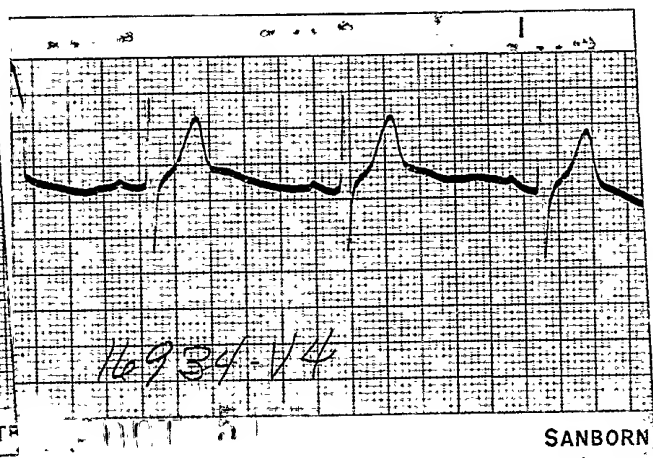
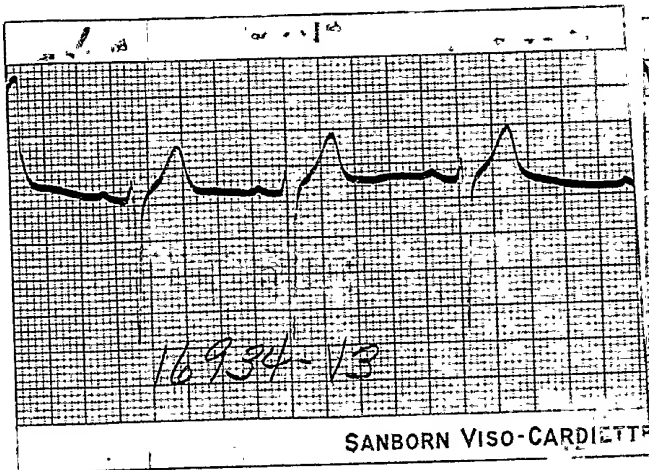
**ELECTROCARDIOGRAPHIC RECORD**  
Standard Form 520  
(Attach tracings to S. F. 507)



SANBORN VISO-CARDIETTE

SANBORN VISO-CARDIETTE *Permapaper*





CLINICAL RECORD						ELECTROCARDIOGRAPHIC RECORD		PREVIOUS ECG <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
CLINICAL IMPRESSION <b>Routine</b>						MEDICATION <b>None</b>		<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input checked="" type="checkbox"/> ROUTINE <input checked="" type="checkbox"/> AMBULANT	
AGE <b>34</b>	SEX <b>M</b>	RACE <b>W</b>	HEIGHT	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN <b>James A. Roberts, MD</b>			DATE <b>2 Feb 53</b>
RHYTHM						AXIS DEVIATION (QRS)		RATES AURIC. VENT.	
INTERVALS PR QRS QT						P WAVES			
QRS COMPLEXES									
RS-T SEGMENT						T WAVES			
UNIPOLAR EXTREMITY LEADS (Specify)									

PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

No significant abnormalities. No significant change from previous EKG Jan 1952.

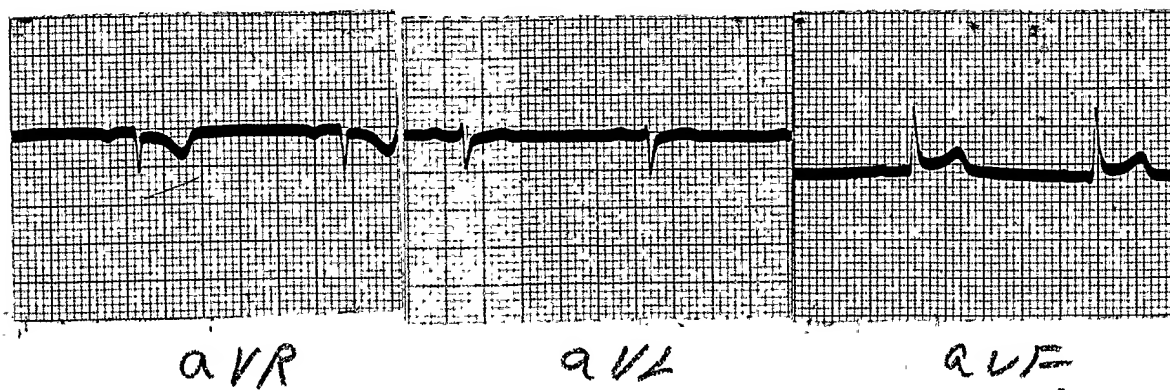
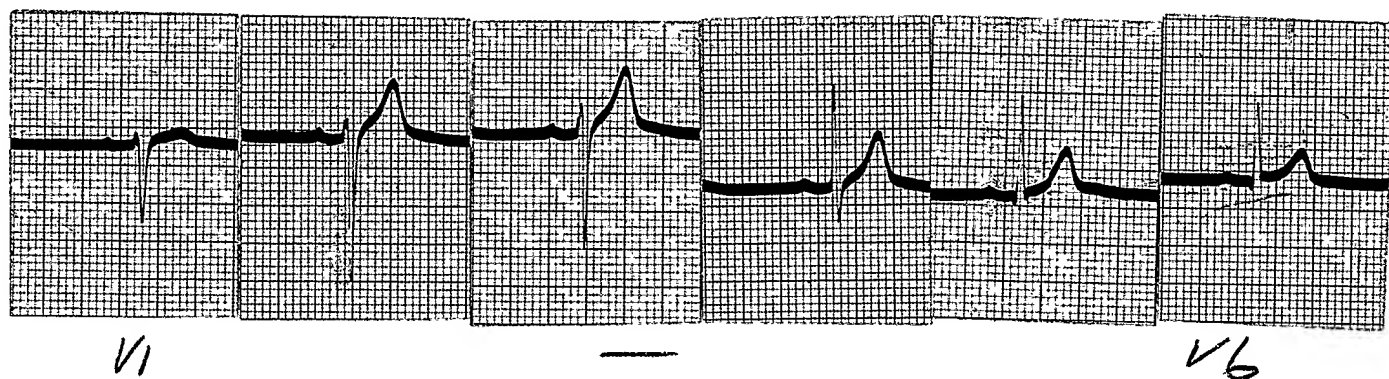
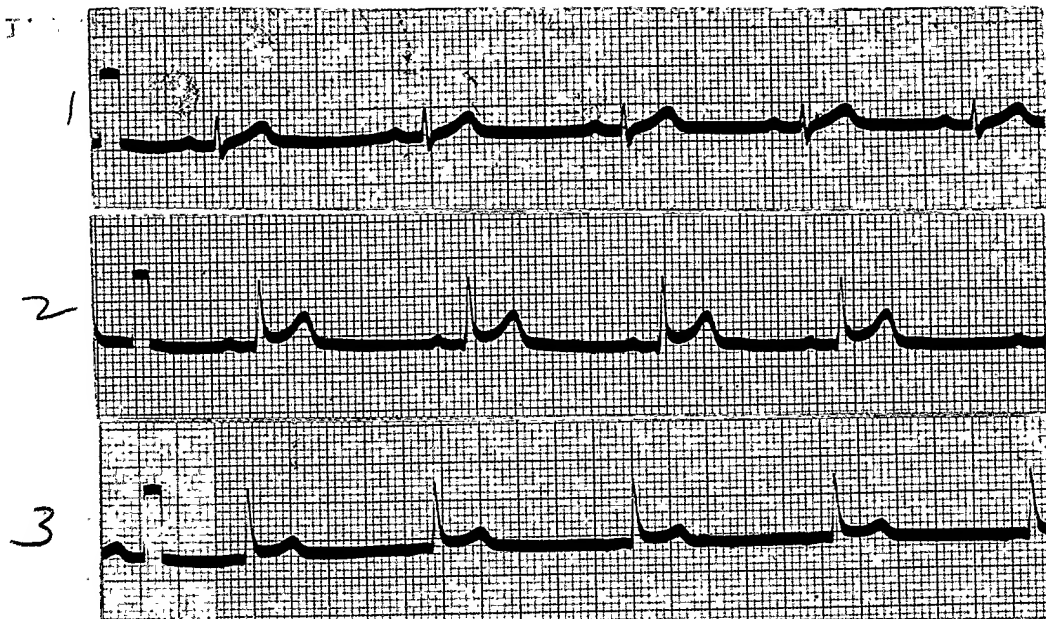
(Continue on reverse)

NO. ECG <b>10051</b>	SIGNATURE <b>E. A. ROSENBERGER, CAPTAIN, MC</b>	TITLE <b>Phy Exam Sect. QRS</b>	DATE <b>FEB 3 1953</b>
PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME <b>Morrill, Donald C. EBT</b>		REGISTER NO.	WARD NO.

ELECTROCARDIOGRAPHIC RECORD

(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)





CLINICAL RECORD

CONSULTATION SHEET

REQUEST

TO: Cardiac Clinic FROM: (Requesting ward, unit, or activity) PHY. EXAM. SECT. DATE OF REQUEST 1 April 52

REASON FOR REQUEST (Complaints and findings)

Abnormal EKG report dated 30 January 52 reads as follows: ST elevation in II, and aVF and V4-6, ST segment depression in aVR, and inverted T waves and deep S in AVL. Clearance for FBI.

PROVISIONAL DIAGNOSIS

DOCTOR'S SIGNATURE: J. A. O. APPROVED PLACE OF CONSULTATION ☐ BEDSIDE ☐ ON CALL ☐ ROUTINE ☐ EMERGENCY

CONSULTATION REPORT

Diagnosis: Observation cardiovascular disease, not found.

Recommendation: There are no recommendations from a cardiovascular standpoint.

Comment: Past history reveals no antecedent illnesses which would predispose to heart disease such as rheumatic fever or diphtheria. There are no symptoms referable to the cardiovascular system. This man was referred because of an abnormal ECG, which on review, Colonel Mattingly and I believe to be within normal limits.

Cardiac examination reveals no abnormalities. The blood pressure is recorded as 116/66. The peripheral pulses are normal.

The ECG is interpreted as being within normal limits. Chest x-ray shows cardiac silhouette to be of normal size and configuration.

J. A. O.

(Continued on reverse side)

SIGNATURE AND TITLE: James A. Urbison, Lt Col MC DATE: 1 April '52 IDENTIFICATION NO. ORGANIZATION: PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME: Morrell, Louis Clark FBI REGISTER NO. PHY. EXAM. SECT. WARD NO.

WALTER REED ARMY HOSPITAL

(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)

CONSULTATION SHEET  
Standard Form 513

CLINICAL RECORD						ELECTROCARDIOGRAPHIC RECORD		PREVIOUS ECG <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
CLINICAL IMPRESSION Stable						MEDICATION None		<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT	
AGE 33	SEX M	RACE W	HEIGHT 60	WEIGHT 160	B. P. 120/80	SIGNATURE OF WARD PHYSICIAN J. B. ...			DATE 10/20/52
RHYTHM						AXIS DEVIATION (QRS)		RATES AURIC. VENT.	
INTERVALS PR QRS QT						P WAVES			
QRS COMPLEXES									
RS-T SEGMENT						T WAVES			
UNIPOLAR EXTREMITY LEADS (Specify)									

PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

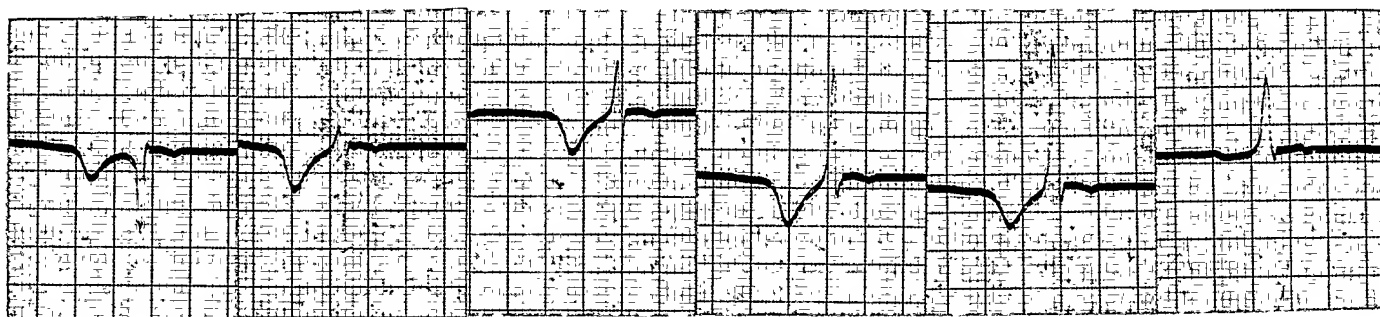
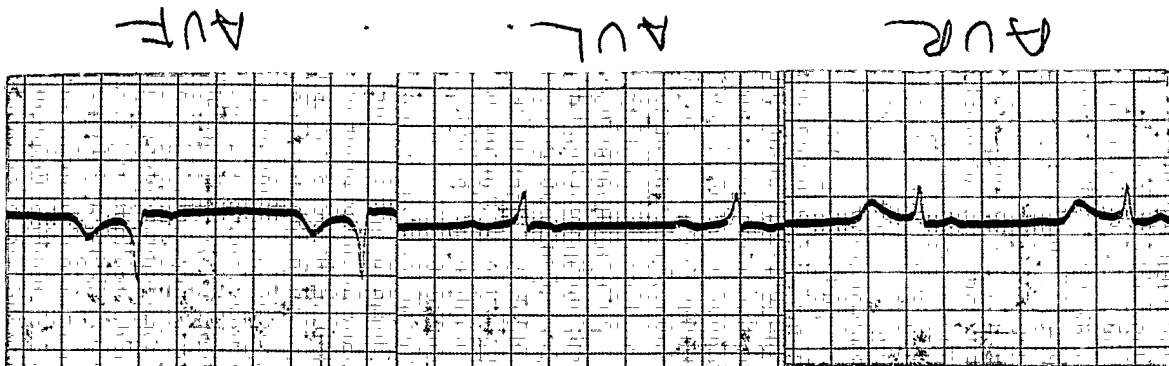
ST elevation in II, III and aVF and V<sub>4-6</sub>, ST segment depression in AVR, and inverted T waves and deep S in AVL. An abnormal ECG requiring clinical correlation.

(Continue on reverse)

NO. ECG 40961	SIGNATURE H. B. ...	TITLE Lt Col, MC	DATE 10/20/52
PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME ...		REGISTER NO. ...	WARD NO. ...

ELECTROCARDIOGRAPHIC RECORD

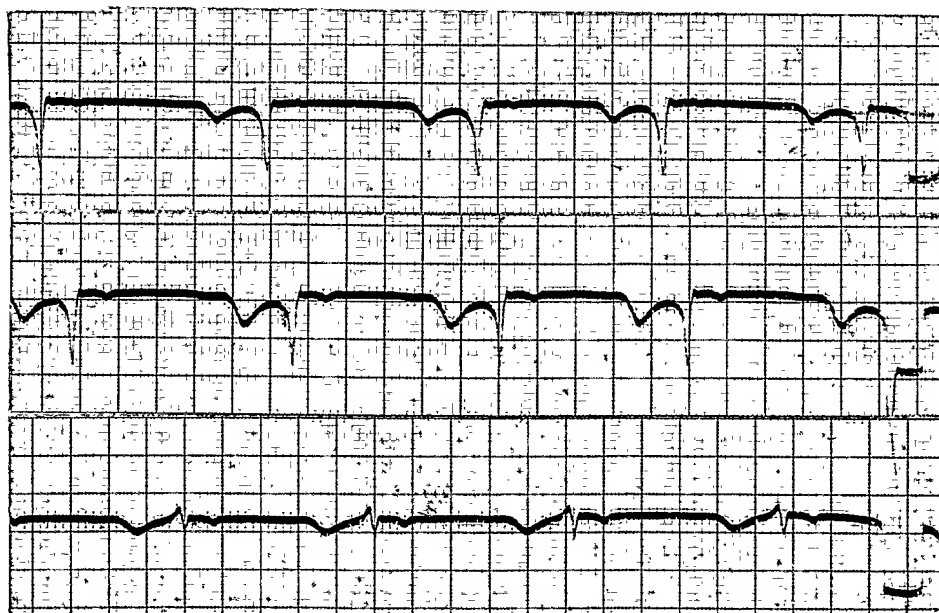
(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)



V-6

T

V-1



I

CLINICAL RECORD				ELECTROCARDIOGRAPHIC RECORD				PREVIOUS ECG	
CLINICAL IMPRESSION ST elevation in II, III and AVF and V4-6, ST segment depression in aVR, and inverted T waves and deep S in aVL. Abnormal ECG 30 Jan 52				MEDICATION None				<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
								<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input checked="" type="checkbox"/> ROUTINE <input checked="" type="checkbox"/> AMBULANT	
AGE 33	SEX M	RACE W	HEIGHT 68 1/2"	WEIGHT 166	BLOOD PRESSURE 110/80	SIGNATURE OF WARD PHYSICIAN J. B. Brady MD		DATE 6 Mar 52	
RHYTHM				AXIS DEVIATION (QRS)		RATES AURIC. VENT.			
INTERVALS PR QRS QT				P WAVES					
QRS COMPLEXES									
RS-T SEGMENT				T WAVES					
UNIPOLAR EXTREMITY LEADS (Specify)									

PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

No significant change from abnormal ECG dated 30 Jan 1952.

(Continue on reverse)

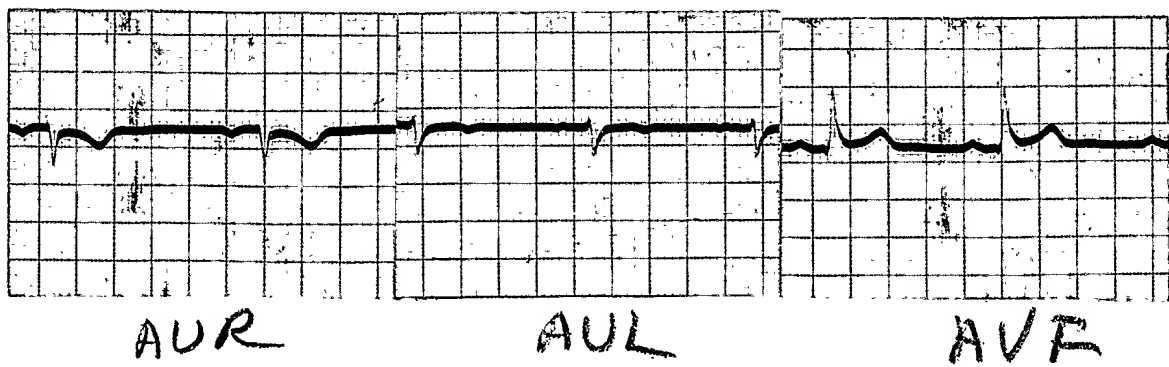
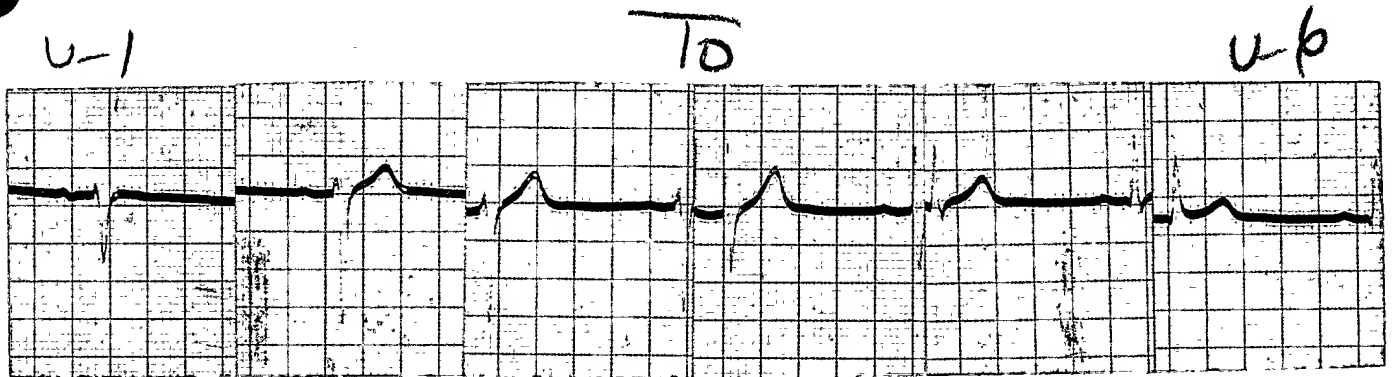
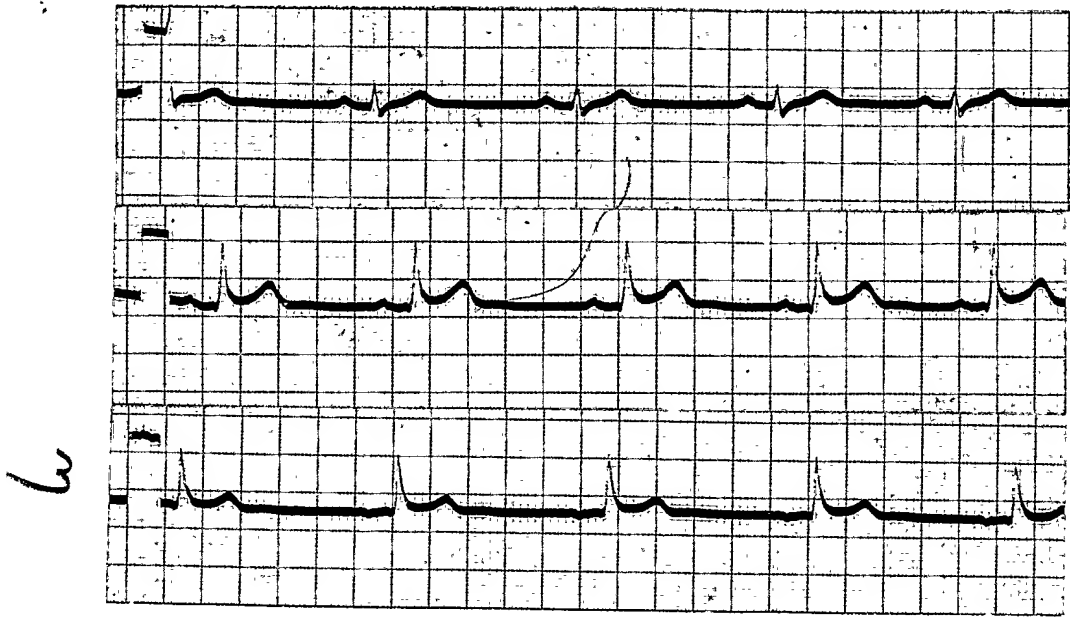
NO. ECG 40861	SIGNATURE H. B. WINSTEAD	TITLE Lt Col, MC	DATE
PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME Morrell, Donald C. FBI		REGISTER NO. Phy Exam Sect OPS	WARD NO.

ELECTROCARDIOGRAPHIC RECORD

Standard Form 520

(Attach tracings to S. F. 507)

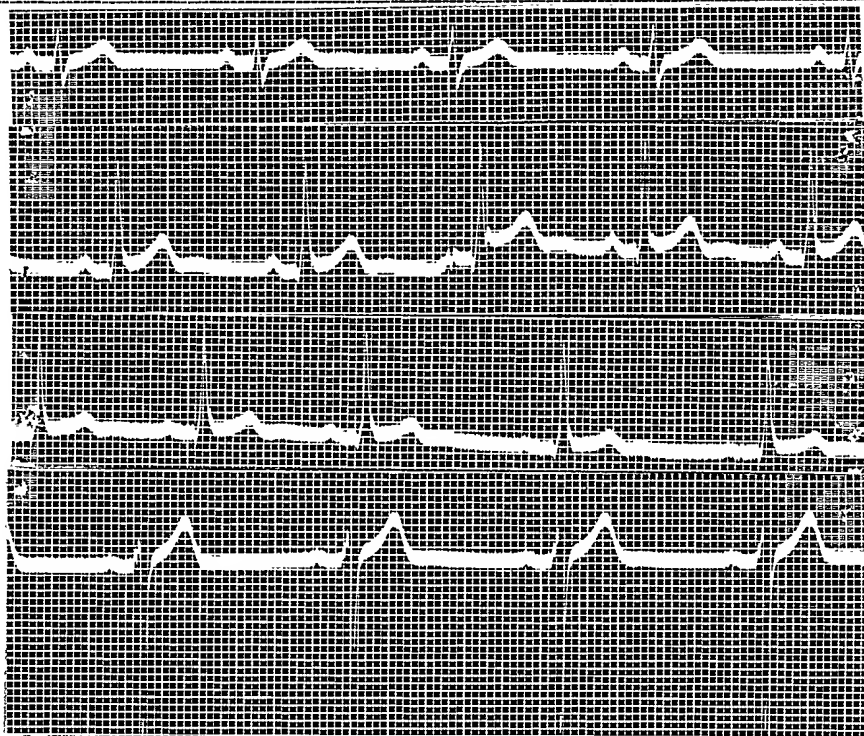
(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)



## ELECTROCARDIOGRAPH STUDY

U. S. NAVAL HOSPITAL, QUANTICO, VA.

NAME MORRELL Donald C RATE EBI AGE 31 WARD "OP"  
DATE 3-22-50 PREVIOUS DIGITALIS (Yes or No) No BLOOD PRESSURE \_\_\_\_\_  
DIAGNOSIS Routine check PREVIOUS TEST No  
REFERRED BY Dr. Brown (MC), U.S.N. CARDIAC NO. 81-50




RATE: 58  
RHYTHM Normal sinus rhythm  
P WAVES: Normal

P-R INTERVAL: 0.18 seconds  
QRS OCCUPIES: 0.09 seconds  
QRS COMPLEXES: Diphasic in lead I.

S-T SEGMENTS: Elevated 1mm in leads II and III.

T WAVES: Upright all leads.

CONCLUSION: Tendency to right axis deviation. Within normal limits.

  
Omar J. BROWN CAPT (MC), U.S. Navy.

<b>CLINICAL RECORD</b>				<b>ELECTROCARDIOGRAPHIC RECORD</b>				PREVIOUS ECG <input type="checkbox"/> YES <input type="checkbox"/> NO	
CLINICAL IMPRESSION						MEDICATION		<input type="checkbox"/> EMERGENCY	<input type="checkbox"/> BEDSIDE
								<input type="checkbox"/> ROUTINE	<input type="checkbox"/> AMBULANT
AGE 41	SEX M	RACE	HEIGHT 67	WEIGHT 157	B. P.	SIGNATURE OF WARD PHYSICIAN Dr. Johnston			DATE 9-16-59 01115
RHYTHM Normal sinus rhythm						AXIS DEVIATION (QRS) +70°		RATES AURIC. VENT. 62	
INTERVALS PR .19 QRS .08 QT						P WAVES			
QRS COMPLEXES									
RS-T SEGMENT						T WAVES			
UNIPOLAR EXTREMITY LEADS (Specify)									

PRECORDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:

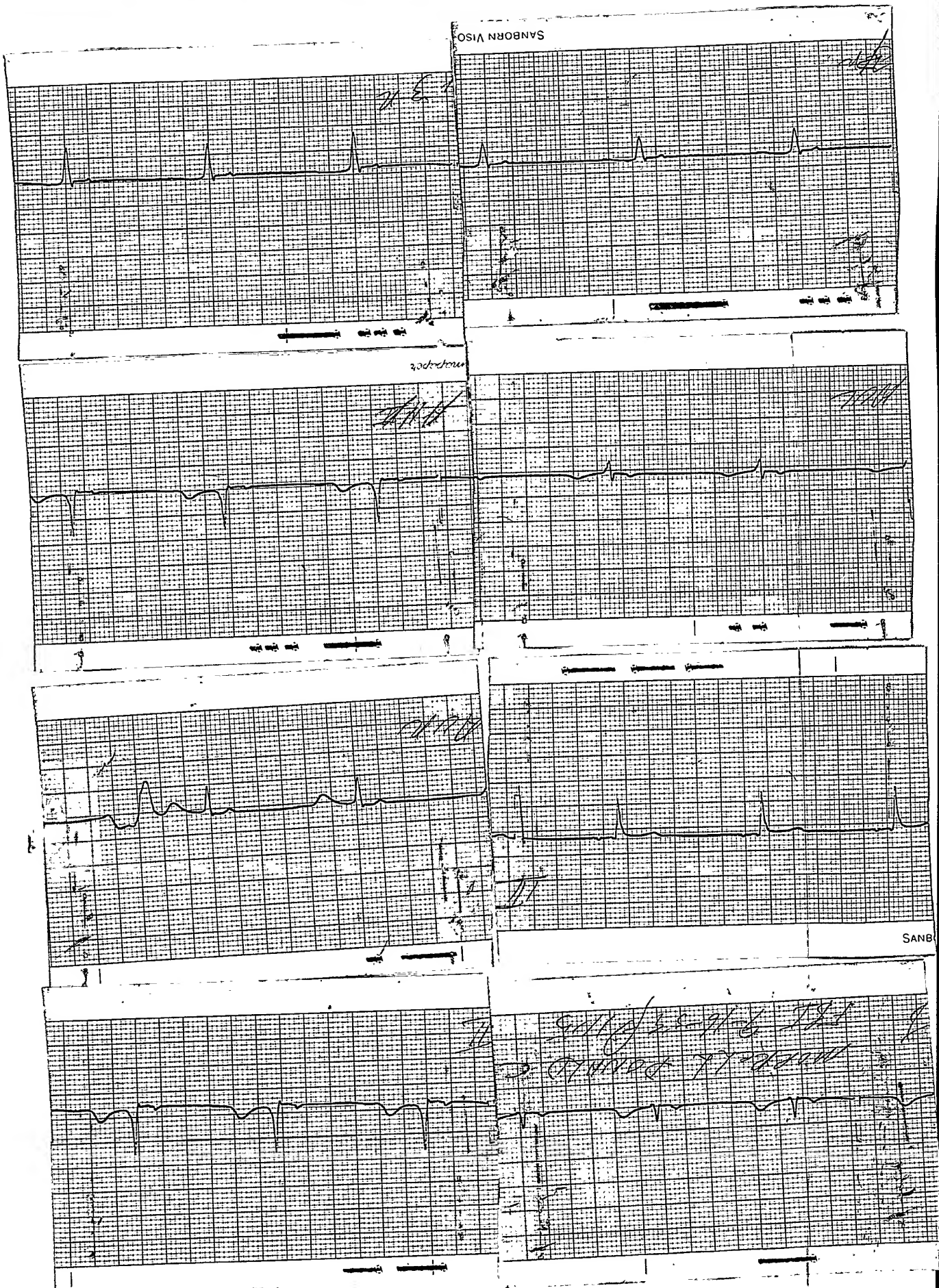
1. Within normal limits.
2. No significant change since 9-19-58.

(Continue on reverse)			
NO. ECG 16934	SIGNATURE R. G. G. Lbraith /dws	TITLE LT MC USN	DATE 9-17-59
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)		REGISTER NO.	WARD NO. St. C1.

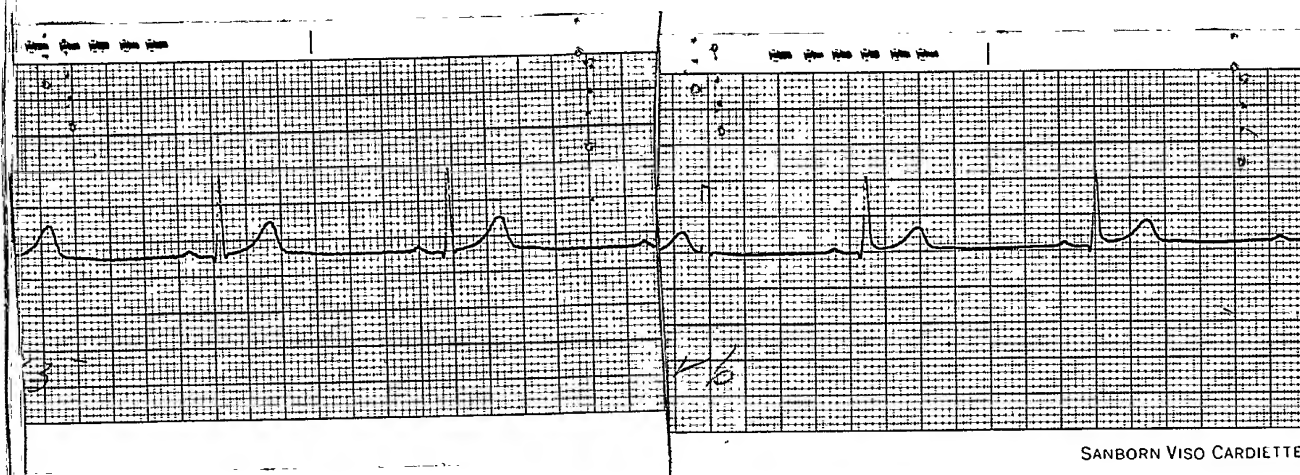
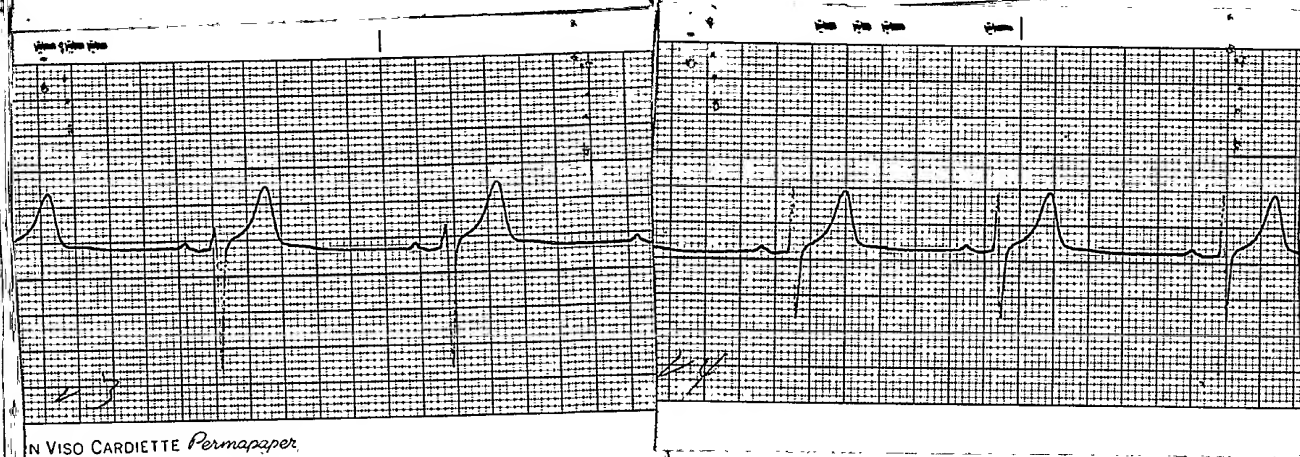
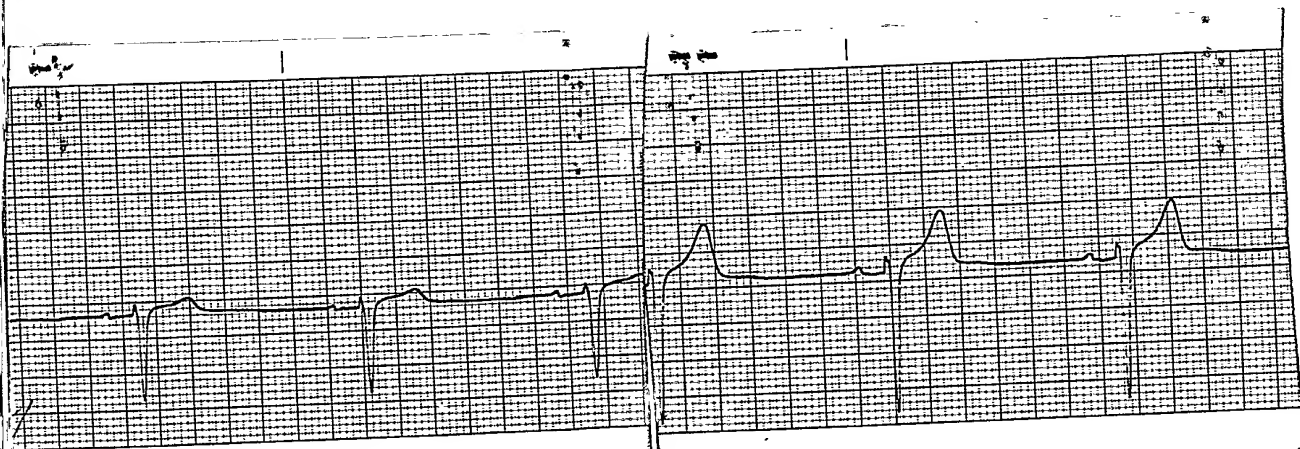
MORRELL, Donald C. FBI  
USNH, NEMO, Bethesda, Md.

ELECTROCARDIOGRAPHIC RECORD  
Standard Form 520  
(Attach tracings to S. F. 507)





6-11-54  
MURKIN  
MURKIN  
MURKIN



UNITED STATES GOVERNMENT

## Memorandum

TO : Mr. DeLoach

DATE: June 2, 1961

FROM : D. C. Morrell *DCM*SUBJECT: WALLISVILLE, TEXAS  
ERROR IN CORRESPONDENCE

*Handwritten initials*

Mr. Tolson	<input checked="" type="checkbox"/>
Mr. DeLoach	<input checked="" type="checkbox"/>
Mr. Evans	<input type="checkbox"/>
Mr. Malone	<input type="checkbox"/>
Mr. Rosen	<input type="checkbox"/>
Mr. Sullivan	<input type="checkbox"/>
Mr. Tavel	<input type="checkbox"/>
Mr. Trotter	<input type="checkbox"/>
Tele. Room	<input type="checkbox"/>
Mr. Ingram	<input type="checkbox"/>
Miss Gandy	<input type="checkbox"/>

*Handwritten: 100-441111-106*

Mr. Tolson has requested an explanation for an error in correspondence prepared by SA  to captioned correspondent dated 6-1-61 in which the letter stated, "I am enclosing some publications dealing with the general subject of communism which you may like to read." However, the first publication attached was the Introduction to the FBI Law Enforcement Bulletin (LEB) of 4-1-60 dealing with juvenile delinquency.

SA  has stated that he meant to enclose the 4-1-61 Introduction to the LEB, dealing with communism and warning against vigilante action on the part of citizens. When the letter was typed up he failed to detect that the 4-1-60 Introduction was enclosed and which was so noted on the yellow rather than the 4-1-61. He regrets his failure to detect this. The letter was reviewed by Inspector Hyde for Mr. Mohr, SA Leinbaugh for Crime Records Division and SA Morrell for Correspondence and Tours Section. They noted that the enclosure was the one listed on the yellow but did not detect that it dealt with another matter than communism.

Mr. Tolson has asked for further explanation of this matter. In checking this letter after its resubmission, he noted that the pamphlet, "Communist Illusion and Democratic Reality," was enclosed although not mentioned in the letter nor listed on the yellow. The letter correctly indicated 5 enclosures; however, only 4 were listed on the yellow.

The letter was originally returned by Mr. Tolson to change the 4-1-60 LEB Introduction to the 4-1-61 Introduction which dealt with communism. The letter itself was not retyped nor was the yellow; both were merely redated and the change was made of the LEB Introduction on the yellow. The omission of "Communist Illusion and Democratic Reality" was on the letter the first time it was sent up. Because of the very heavy volume of mail this morning, Friday,

## Enclosures

- 1 - Mr. Mohr  
1 - Mr. DeLoach

DCM:mlw  
(6)

(Continued next page)

61-498931-106  
Searched  
8 JUN 18 1961

XEROX  
JUN 19

Morrell to DeLoach memo

an early mail deadline day, and the desire to get the entire package back to Mr. Tolson as quickly as possible, this continuing error was not detected. Emphasis was placed on making sure that the proper LEB Introduction was inserted. It is extremely regrettable that this omission was not detected in the first instance and every precaution will be taken to prevent further such omissions.

RECOMMENDATIONS:

(1) That SA [redacted] be censured for his failure to detect this error in correspondence prepared by him.

b6  
b7C

(2) That Inspector <sup>W.H.S.</sup> Hyde and SA's <sup>HAROLD P.</sup> Leinbaugh and <sup>DON C.</sup> Morrell be charged with reviewing errors.

*censure Hyde, Leinbaugh  
and Morrell*  
6-4

*sent 6/2/61  
ENC*

(3) That the attached letter to [redacted] be approved.

*This was complete carelessness  
on [redacted] part and  
he should be severely  
censured -*

*Jagace  
JRM*

*5612*

*gpc*



# MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT 68		52. WEIGHT 157		53. COLOR HAIR Brown		54. COLOR EYES Blue		55. BUILD: <input type="checkbox"/> SLENDER <input type="checkbox"/> MEDIUM <input checked="" type="checkbox"/> HEAVY <input type="checkbox"/> OBESE				56. TEMPERATURE 98.6			
57. BLOOD PRESSURE (Arm at heart level)								58. PULSE (Arm at heart level)							
A. SITTING SYS. 100 DIAS. 60		B. RECUMBENT SYS. DIAS.		C. STANDING (3 min.) SYS. DIAS.		A. SITTING 72		B. AFTER EXERCISE		C. 2 MIN. AFTER		D. RECUMBENT		E. AFTER STANDING 3 MIN.	
59. DISTANT VISION				60. REFRACTION				61. 75/171 NEAR VISION							
RIGHT 20/20 CORR. TO 20/				BY S. OX				20/16 CORR. TO BY							
LEFT 20/20 CORR. TO 20/				BY S. OX				20/16 CORR. TO BY							
62. HETEROPHORIA (Specify distance)															
ES°		EX°		R. H.		L. H.		PRISM DIV.		PRISM CONV. CT		PC		PD	
63. ACCOMMODATION				64. COLOR VISION (Test used and result)				65. DEPTH PERCEPTION (Test used and score)				UNCORRECTED			
RIGHT LEFT				AOC-1946 18/18								CORRECTED			
66. FIELD OF VISION				67. NIGHT VISION (Test used and score)				68. RED LENS TEST				69. INTRAOCULAR TENSION			
70. HEARING				71. AUDIOMETER								72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)			
RIGHT WV /15 SV /15				250 266 500 612 1000 1024 2000 2048 3000 2896 4000 4096 8000 8144 8000 8192											
LEFT WV 15 /15 SV 15 /15				RIGHT											
				LEFT											

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

Frequent hacking + clearing of throat when tired - Nuporus 55 ppm

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

32. Punctus ani, mild Vioform

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

76. A. PHYSICAL PROFILE					
P	U	L	H	E	S

77. EXAMINEE (Check)

A. ☒ IS QUALIFIED FOR  
B. ☐ IS NOT QUALIFIED FOR

B. PHYSICAL CATEGORY

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

A	B	C	E

79. TYPED OR PRINTED NAME OF PHYSICIAN

G. R. JOHNSTON, CAPT, MC, USA

SIGNATURE

G. R. Johnston

80. TYPED OR PRINTED NAME OF PHYSICIAN

SIGNATURE

81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)

SIGNATURE

82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY

SIGNATURE

NUMBER OF ATTACHED SHEETS



# REPORT OF MEDICAL HISTORY

THIS INFORMATION IS FOR OFFICIAL USE ONLY AND WILL NOT BE RELEASED TO UNAUTHORIZED PERSONS

**FBI**

1. LAST NAME—FIRST NAME—MIDDLE NAME <b>MORRELL, DONALD CLARK</b>			2. GRADE AND COMPONENT OR POSITION <b>SPECIAL AGENT</b>		3. IDENTIFICATION NO.	
4. HOME ADDRESS (Number, street or RFD, city or town, zone and State)			5. PURPOSE OF EXAMINATION <b>ANNUAL EXAM</b>		6. DATE OF EXAMINATION <b>6/7/61</b>	
7. SEX <b>M</b>	8. RACE <b>W</b>	9. TOTAL YRS. GOVT. SERVICE MILITARY CIVILIAN	10. DEPARTMENT, AGENCY, OR SERVICE		11. ORGANIZATION UNIT	
12. DATE OF BIRTH <b>JUNE 13, 1918</b>		13. PLACE OF BIRTH <b>BROOKLYN, N.Y.</b>		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN		
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS				16. OTHER INFORMATION		

17. STATEMENT OF EXAMINEE'S PRESENT HEALTH IN OWN WORDS. (Follow by description of past history, if complaint exists)

**GOOD**

## 18. FAMILY HISTORY

RELATION	AGE	STATE OF HEALTH	IF DEAD, CAUSE OF DEATH	AGE AT DEATH	YES	NO	(Check each item)	RELATION(S)
FATHER			<b>CORONARY OCCLUSION</b>	<b>61</b>		<input checked="" type="checkbox"/>	HAD TUBERCULOSIS	
MOTHER	<b>69</b>	<b>GOOD</b>				<input checked="" type="checkbox"/>	HAD SYPHILIS	
SPOUSE	<b>42</b>	<b>GOOD</b>				<input checked="" type="checkbox"/>	HAD DIABETES	
	<b>46</b>	<b>GOOD</b>				<input checked="" type="checkbox"/>	HAD CANCER	
BROTHERS						<input checked="" type="checkbox"/>	HAD KIDNEY TROUBLE	
AND					<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	HAD HEART TROUBLE	<b>FATHER</b>
<b>SISTERS</b>						<input checked="" type="checkbox"/>	HAD STOMACH TROUBLE	
						<input checked="" type="checkbox"/>	HAD RHEUMATISM (Arthritis)	
CHILDREN		<b>GOOD</b>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	HAD ASTHMA (HAY FEVER) HIVES	<b>WIFE</b>
		<b>GOOD</b>				<input checked="" type="checkbox"/>	HAD EPILEPSY (Fits)	
						<input checked="" type="checkbox"/>	COMMITTED SUICIDE	
						<input checked="" type="checkbox"/>	BEEN INSANE	

## 20. HAVE YOU EVER HAD OR HAVE YOU NOW (Place check at left of each item)

YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)
<input checked="" type="checkbox"/>		SCARLET FEVER, ERYSIPELAS	<input checked="" type="checkbox"/>		GOITER	<input checked="" type="checkbox"/>		TUMOR, GROWTH, CYST, CANCER	<input checked="" type="checkbox"/>		"TRICK" OR LOCKED KNEE
<input checked="" type="checkbox"/>		DIPHTHERIA	<input checked="" type="checkbox"/>		TUBERCULOSIS	<input checked="" type="checkbox"/>		RUPTURE	<input checked="" type="checkbox"/>		FOOT TROUBLE
<input checked="" type="checkbox"/>		RHEUMATIC FEVER	<input checked="" type="checkbox"/>		SOAKING SWEATS (Night sweats)	<input checked="" type="checkbox"/>		APPENDICITIS	<input checked="" type="checkbox"/>		NEURITIS
<input checked="" type="checkbox"/>		SWOLLEN OR PAINFUL JOINTS	<input checked="" type="checkbox"/>		ASTHMA	<input checked="" type="checkbox"/>		PILES OR RECTAL DISEASE	<input checked="" type="checkbox"/>		PARALYSIS (Inc. infantile)
<input checked="" type="checkbox"/>		MUMPS	<input checked="" type="checkbox"/>		SHORTNESS OF BREATH	<input checked="" type="checkbox"/>		FREQUENT OR PAINFUL URINATION	<input checked="" type="checkbox"/>		EPILEPSY OR FITS
<input checked="" type="checkbox"/>		WHOOPING COUGH	<input checked="" type="checkbox"/>		PAIN OR PRESSURE IN CHEST	<input checked="" type="checkbox"/>		KIDNEY STONE OR BLOOD IN URINE	<input checked="" type="checkbox"/>		CAR, TRAIN, SEA, OR AIR SICKNESS
<input checked="" type="checkbox"/>		FREQUENT OR SEVERE HEADACHE	<input checked="" type="checkbox"/>		CHRONIC COUGH	<input checked="" type="checkbox"/>		SUGAR OR ALBUMIN IN URINE	<input checked="" type="checkbox"/>		FREQUENT TROUBLE SLEEPING
<input checked="" type="checkbox"/>		DIZZINESS OR FAINTING SPELLS	<input checked="" type="checkbox"/>		PALPITATION OR POUNDING HEART	<input checked="" type="checkbox"/>		BOILS	<input checked="" type="checkbox"/>		FREQUENT OR TERRIFYING NIGHTMARES
<input checked="" type="checkbox"/>		EYE TROUBLE	<input checked="" type="checkbox"/>		HIGH OR LOW BLOOD PRESSURE	<input checked="" type="checkbox"/>		VENEREAL DISEASE	<input checked="" type="checkbox"/>		DEPRESSION OR EXCESSIVE WORRY
<input checked="" type="checkbox"/>		EAR, NOSE OR THROAT TROUBLE	<input checked="" type="checkbox"/>		CRAMPS IN YOUR LEGS	<input checked="" type="checkbox"/>		RECENT GAIN OR LOSS OF WEIGHT	<input checked="" type="checkbox"/>		LOSS OF MEMORY OR AMNESIA
<input checked="" type="checkbox"/>		RUNNING EARS	<input checked="" type="checkbox"/>		FREQUENT INDIGESTION	<input checked="" type="checkbox"/>		ARTHRITIS OR RHEUMATISM	<input checked="" type="checkbox"/>		BED WETTING
<input checked="" type="checkbox"/>		CHRONIC OR FREQUENT COLDS	<input checked="" type="checkbox"/>		STOMACH, LIVER OR INTESTINAL TROUBLE	<input checked="" type="checkbox"/>		BOKE, JOINT, OR OTHER DEFORMITY	<input checked="" type="checkbox"/>		NERVOUS TROUBLE OF ANY SORT
<input checked="" type="checkbox"/>		SEVERE TOOTH OR GUM TROUBLE	<input checked="" type="checkbox"/>		GALL BLADDER TROUBLE OR GALL STONES	<input checked="" type="checkbox"/>		LAMENESS	<input checked="" type="checkbox"/>		ANY DRUG OR NARCOTIC HABIT
<input checked="" type="checkbox"/>		SINUSITIS	<input checked="" type="checkbox"/>		JAUNDICE	<input checked="" type="checkbox"/>		LOSS OF ARM, LEG, FINGER, OR TOE	<input checked="" type="checkbox"/>		EXCESSIVE DRINKING HABIT
<input checked="" type="checkbox"/>		HAY FEVER	<input checked="" type="checkbox"/>		ANY REACTION TO SERUM, DRUG OR MEDICINE	<input checked="" type="checkbox"/>		PAINFUL OR "TRICK" SHOULDER OR ELBOW	<input checked="" type="checkbox"/>		HOMOSEXUAL TENDENCIES

## 21. HAVE YOU EVER (Check each item)

<input checked="" type="checkbox"/>	WORN GLASSES	<input checked="" type="checkbox"/>	ATTEMPTED SUICIDE	<input checked="" type="checkbox"/>	BEEN PREGNANT		AGE AT ONSET OF MENSTRUATION
<input checked="" type="checkbox"/>	WORN AN ARTIFICIAL EYE	<input checked="" type="checkbox"/>	BEEN A SLEEP WALKER	<input checked="" type="checkbox"/>	HAD A VAGINAL DISCHARGE		INTERVAL BETWEEN PERIODS
<input checked="" type="checkbox"/>	WORN HEARING AIDS	<input checked="" type="checkbox"/>	LIVED WITH ANYONE WHO HAD TUBERCULOSIS	<input checked="" type="checkbox"/>	BEEN TREATED FOR A FEMALE DISORDER		DURATION OF PERIODS
<input checked="" type="checkbox"/>	STUTTERED OR STAMMERED	<input checked="" type="checkbox"/>	COUGHED UP BLOOD	<input checked="" type="checkbox"/>	HAD PAINFUL MENSTRUATION		DATE OF LAST PERIOD
<input checked="" type="checkbox"/>	WORN A BRACE OR BACK SUPPORT	<input checked="" type="checkbox"/>	bled excessively after injury or tooth extraction	<input checked="" type="checkbox"/>	HAD IRREGULAR MENSTRUATION	QUANTITY: <input type="checkbox"/> NORMAL <input type="checkbox"/> EXCESSIVE <input type="checkbox"/> SCANTY	

## 23. HOW MANY JOBS HAVE YOU HAD IN THE PAST THREE YEARS?

**ONE**

## 24. WHAT IS THE LONGEST PERIOD YOU HELD ANY OF THESE JOBS?

**14 yrs**

## 25. WHAT IS YOUR USUAL OCCUPATION?

**SPECIAL AGENT (FB)**

## 26. ARE YOU (Check one)

☒ RIGHT HANDED ☐ LEFT HANDED

**67-421042-144**

YES	NO	CHECK EACH ITEM YES OR NO. EVERY ITEM CHECKED "YES" MUST BE FULLY EXPLAINED IN BLANK SPACE ON RIGHT
	<input checked="" type="checkbox"/>	27. HAVE YOU BEEN UNABLE TO HOLD A JOB BECAUSE OF: A. SENSITIVITY TO CHEMICALS, DUST, SUNLIGHT, ETC.
	<input checked="" type="checkbox"/>	B. INABILITY TO PERFORM CERTAIN MOTIONS
	<input checked="" type="checkbox"/>	C. INABILITY TO ASSUME CERTAIN POSITIONS
	<input checked="" type="checkbox"/>	D. OTHER MEDICAL REASONS (If yes, give reasons)
	<input checked="" type="checkbox"/>	28. HAVE YOU EVER WORKED WITH RADIOACTIVE SUBSTANCE?
	<input checked="" type="checkbox"/>	29. DID YOU HAVE DIFFICULTY WITH SCHOOL STUDIES OR TEACHERS? (If yes, give details)
	<input checked="" type="checkbox"/>	30. HAVE YOU EVER BEEN REFUSED EMPLOYMENT BECAUSE OF YOUR HEALTH? (If yes, state reason and give details)
	<input checked="" type="checkbox"/>	31. HAVE YOU EVER BEEN DENIED LIFE INSURANCE? (If yes, state reason and give details)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	32. HAVE YOU HAD, OR HAVE YOU BEEN ADVISED TO HAVE, ANY OPERATIONS? (If yes, describe and give age at which occurred)
	<input checked="" type="checkbox"/>	33. HAVE YOU EVER BEEN A PATIENT (committed or voluntary) IN A MENTAL HOSPITAL OR SANATORIUM? (If yes, specify when, where, why, and name of doctor, and complete address of hospital or clinic)
	<input checked="" type="checkbox"/>	34. HAVE YOU EVER HAD ANY ILLNESS OR INJURY OTHER THAN THOSE ALREADY NOTED? (If yes, specify when, where, and give details)
	<input checked="" type="checkbox"/>	35. HAVE YOU CONSULTED OR BEEN TREATED BY CLINICS, PHYSICIANS, HEALERS, OR OTHER PRACTITIONERS WITHIN THE PAST 5 YEARS? (If yes, give complete address of doctor, hospital, clinic, and details)
	<input checked="" type="checkbox"/>	36. HAVE YOU TREATED YOURSELF FOR ILLNESSES OTHER THAN MINOR COLDS? (If yes, which illnesses)
	<input checked="" type="checkbox"/>	37. HAVE YOU EVER BEEN REJECTED FOR MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date and reason for rejection)
	<input checked="" type="checkbox"/>	38. HAVE YOU EVER BEEN DISCHARGED FROM MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date, reason, and type of discharge: whether honorable, other than honorable, for unfitness or unsuitability)
	<input checked="" type="checkbox"/>	39. HAVE YOU EVER RECEIVED, IS THERE PENDING, HAVE YOU APPLIED FOR, OR DO YOU INTEND TO APPLY FOR PENSION OR COMPENSATION FOR EXISTING DISABILITY? (If yes, specify what kind, granted by whom, and what amount, when, why)

TONSILLECTOMY + A.D. age 5

I CERTIFY THAT I HAVE REVIEWED THE FOREGOING INFORMATION SUPPLIED BY ME AND THAT IT IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.  
I AUTHORIZE ANY OF THE DOCTORS, HOSPITALS, OR CLINICS MENTIONED ABOVE TO FURNISH THE GOVERNMENT A COMPLETE TRANSCRIPT OF MY MEDICAL RECORD FOR PURPOSES OF PROCESSING MY APPLICATION FOR THIS EMPLOYMENT OR SERVICE.

TYPED OR PRINTED NAME OF EXAMINEE

SIGNATURE

Ronald Clark Morrell

40. PHYSICIAN'S SUMMARY AND ELABORATION OF ALL PERTINENT DATA (Physician shall comment on all positive answers in items 20 thru 39)

Has frequent hacking + coughing when tired.

TYPED OR PRINTED NAME OF PHYSICIAN OR EXAMINER

G. R. JOHNSTON, CAPT, MC, US.

DATE

JUN 7 '61

SIGNATURE

G. R. Johnston

NUMBER OF ATTACHED SHEETS



**Attachment to Standard Form 88, Report of Medical Examination  
For Information and Guidance of Medical Examiner**

Name of Examinee MORRELL DONALD CLARK  
(Type or print) Last First Middle

The following portions of the attached examination report form need not be completed:

2	62
3	65
4	67
9	68
11	69
14	72
17	76

46. Is necessary unless facilities for affording same are not readily available.
48. Not required unless examinee is over 35 years of age or examination indicates such is desirable.
49. Is necessary unless facilities for affording same are not readily available.
71. Audiometer examinations should be afforded whenever possible.

**For All Examinees, Whether Clerical or Special Agent Applicants or Employees:**

*The medical examiner should answer the following question:*

Examinee ☒ is ☐ is not qualified for strenuous physical exertion.

**To be Answered in the Case of All Male Employees and Male Applicants:**

1. Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

2. Does examinee have any defects prohibiting safe operation of motor vehicles?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

If examinee has defective vision, should he wear corrective glasses while operating a motor vehicle? ☐ Yes ☐ No *NA*

*67-42104 2-144*  
**ENCLOSURE**

Desirable Weight Ranges for Males

Height	Small Frame	Medium Frame	Large Frame
5' 4"	117 - 125	123 - 135	131 - 148
5' 5"	120 - 129	126 - 139	134 - 152
5' 6"	124 - 133	130 - 143	138 - 157
5' 7"	128 - 137	134 - 148	143 - 162
5' 8"	132 - 141	138 - 152	147 - 166
5' 9"	136 - 146	142 - 156	151 - 170
5' 10"	140 - 150	146 - 161	155 - 175
5' 11"	144 - 154	150 - 166	160 - 180
6'	148 - 158	154 - 171	164 - 185
6' 1"	152 - 163	158 - 176	169 - 190
6' 2"	156 - 167	163 - 181	174 - 195
6' 3"	160 - 171	168 - 186	178 - 200
6' 4"	169 - 180	178 - 196	188 - 210
6' 5"	174 - 185	182 - 202	192 - 216

3. Examinee's frame is ☐ small ☐ medium ☒ large
4. Considering above weight table, the examinee's frame, and other individual physical characteristics, I consider his present weight ☒ Satisfactory ☐ Excessive ☐ Deficient
5. Under proper medical supervision, examinee should ☐ lose \_\_\_\_\_ pounds  
☐ gain \_\_\_\_\_ pounds

Remarks: \_\_\_\_\_

G. R. Johnston  
 (Signature of Medical Examiner)

JUN 16 1961  
 (Date)

FOR THE PERSONNEL FILE OF: DONALD C. MORRELL

PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME		REGISTER NO.	WARD NO.
MORRELL, DONALD C.		REQUESTED BY FBI HEALTH SERVICE	DATE OF REQUEST JUL 5 1961
		DATE, TIME SPECIMEN COLLECTED	(Check one) <input type="checkbox"/> BED PATIENT <input checked="" type="checkbox"/> AMBULATORY
(Above space for mechanical imprinting, if used)			
CHECK (✓) EXAM. REQUESTED	RESULTS	OTHER TESTS OR EXAMINATIONS (Specify)	
COLOR-APPEARANCE		REMARKS HEALTH SERVICE <i>meck</i> JUL 10 1961	
REACTION			
<input checked="" type="checkbox"/> SPECIFIC GRAVITY	1.023		
<input checked="" type="checkbox"/> ALBUMIN (Qual.)	0		
<input checked="" type="checkbox"/> ALBUMIN (Quant.)			
<input checked="" type="checkbox"/> SUGAR (Qual.)	0		
SUGAR (Quant.)			
ACETONE			
DIACETIC ACID		SIGNATURE (Specify Lab. if not part of requesting facility) <i>DR reh</i>	
BILE		NAME OF HOSPITAL OR OTHER MEDICAL FACILITY	
<input type="checkbox"/> MICROSCOPIC			

Standard Form 514a—Rev. August 1954. Promulgated  
By Bureau of the Budget—Circular A—32

GPO

16—50268—4†

URINALYSIS

67-101-100000  
C-1001

65

3  
pack

RECEIPT FOR GOVERNMENT PROPERTY  
FEDERAL BUREAU OF INVESTIGATION  
UNITED STATES DEPARTMENT OF JUSTICE

8/11/61

I certify that I have received the following Government property for official use:

~~XXXXXX~~

KEY TO ROOM 4718

FILE

3-M

PER

Very truly yours,

READ

The Government property which you hereby acknowledge is charged to you and you are responsible for taking care of it and returning it when its use has been completed. DO NOT MARK OR WRITE ON IT OR MUTILATE IT IN ANY WAY.

3 JUL 22 1961

(Written  
Signature)

Donald C. Morrell per H.N.A.

(Typed  
Signature)

DONALD C. MORRELL

RECEIPT FOR GOVERNMENT PROPERTY  
FEDERAL BUREAU OF INVESTIGATION  
UNITED STATES DEPARTMENT OF JUSTICE

8/11/61

I certify that I have ~~received~~ the following Government property for official use:  
returned

One Key Each to Rooms 4237, 4243, 4235, 4230

FILE

3-M

PER

READ

The Government property which you hereby acknowledge is charged to you and you are responsible for taking care of it and returning it when its use has been completed. DO NOT MARK OR WRITE ON IT OR MUTILATE IT IN ANY WAY.

Very truly yours,

(Written  
Signature)

Donald C. Morrell *per HHA*

(Typed  
Signature)

DONALD C. MORRELL

52

AUG 10 1961

RECEIPT FOR GOVERNMENT PROPERTY  
FEDERAL BUREAU OF INVESTIGATION  
UNITED STATES DEPARTMENT OF JUSTICE

8-15-61

I certify that I have ~~received~~ the following Government property for official use:  
returned

Key to room 4237 ✓✓

FILE

3-M

PER

READ

The Government property which you hereby acknowledge is charged to you and you are responsible for taking care of it and returning it when its use has been completed. DO NOT MARK OR WRITE ON IT OR MUTILATE IT IN ANY WAY.

Very truly yours,

(Written  
Signature)

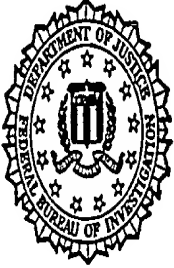
*D. C. Morrell per*

(Typed  
Signature)

D. C. Morrell

52

AUG 15 1961



UNITED STATES DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION

In Reply, Please Refer to  
File No.

WASHINGTON 25, D. C.

AUG 11 1961

Director  
Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C.

RE: SA DONALD C. MORRELL  
(Type or print plainly)

Dear Sir:

For inclusion in the fund to be paid to the designated beneficiary of any Special Agent of the FBI who has previously contributed to this fund and who dies from any cause except self-destruction while employed as a Special Agent, I am forwarding herewith (by CHECK - MONEY ORDER) the sum of \$10, payable to the Assistant Director, Administrative Division, FBI, to be included in said fund. Payment will be made for death by self-destruction after the Agent has been a member of the fund for a continuous period of two years. It is understood and agreed that the sum tendered herewith is a voluntary, gratuitous contribution to said fund which I understand is to be administered in the following manner.

The Director of the FBI will appoint a committee which shall consider all matters pertaining to the acquisition, safe keeping and expending of said fund, which committee will recommend appropriate action to the Director in pertinent matters. The Assistant Director of the Administrative Division of the FBI shall receive all contributions and account for same to the Director. Upon the death of any Special Agent who is a member of said fund the appointed committee will consider the case and submit a recommendation to the Director as to its conclusions. Appropriate instructions will then be issued to the Assistant Director of the Administrative Division, directing him to pay to the designated beneficiary the sum of \$10,000. The liability of the fund shall not under any circumstances exceed the amount of monies in the fund at the time any liability shall occur. The following person is designated as my beneficiary for FBI Agents' Insurance Fund:

Name	Relationship	Date
Elizabeth H. Morrell	Wife	7-31-61
Address		
5516 Charlcoate Road, Bethesda, Maryland		

The following person is designated as my beneficiary under the Chas. S. Ross Fund providing \$1500 death benefit to beneficiary of agents killed in the line of duty, other than travel accidents.

Name	Relationship	Date
Elizabeth H. Morrell	Wife	7-31-61
Address		
5516 Charlcoate Road, Bethesda, Maryland		

67-NOT RECORDED  
8 SEP 13 1961

Very truly yours,

*Donald C. Morrell* 3-mch  
Special Agent

UNITED STATES GOVERNMENT

## Memorandum

TO : Mr. DeLoach

DATE: 8-18-61

FROM : D. C. Morrell

Tolson \_\_\_\_\_  
 Belmont \_\_\_\_\_  
 Mohr \_\_\_\_\_  
 Casper \_\_\_\_\_  
 Conrad \_\_\_\_\_  
 DeLoach \_\_\_\_\_  
 Evans \_\_\_\_\_  
 Malone \_\_\_\_\_  
 Rosen \_\_\_\_\_  
 Sullivan \_\_\_\_\_  
 Tavel \_\_\_\_\_  
 Trotter \_\_\_\_\_  
 Tele. Room \_\_\_\_\_  
 Ingram \_\_\_\_\_  
 Gandy \_\_\_\_\_

SUBJECT: CORRESPONDENCE TO SAC CLARENCE M. KELLEY

The Director has asked "Why did it take from Aug. 4 until Aug. 15 to handle this?" in connection with correspondence received from SAC Clarence M. Kelley, Memphis Division.

A letter dated 8-1-61 from SAC Clarence M. Kelley was received in Mr. DeLoach's Office at 6:10 p.m. Friday, 8-4-61, and was routed to Correspondence and Tours Section, being received there the morning of Monday, 8-7-61. When I received this letter, I reviewed it to see what action should be taken. I noted that Mr. Kelley had referred to a previous letter from the Director of 7-19-61 permitting Kelley to place his application in line for consideration for the job of Chief of Police in Kansas City. Kelley's letter then related some information pertaining to his seeking that position and then set forth some data regarding the general conditions in the Memphis Field Division. Consistent with approved policy being followed within the Division of not acknowledging letters from SACs unless there was some specific reason to do so, I determined that no acknowledgment was necessary in this instance and so marked the lower left-hand corner of the letter and forwarded it through channels for routing to the Bureau officials whose names were checked in the routing block for information purposes. Thus I took action immediately upon its receipt and it is to be noted the letter was received next in Mr. Mohr's Office at 9:41 a.m. 8-7-61 and in Mr. Evans' Office at 11:30 a.m. the same day, thereafter going to the various Bureau officials. On the morning of 8-15-61 it was received in the Director's Office and Miss Gandy thought an acknowledgment was in order and the letter was routed back to me. I immediately assigned it to SA [redacted] who dictated a very brief letter of acknowledgment within minutes and it was immediately sent through channels on that day for approval, being sent to the Director that date.

AUG 24 1961

I was governed in my decision by the content of Mr. Kelley's letter. We do not acknowledge all letters of SACs because it is felt that it is their job to keep the Director informed and in order to cut down on the paper work the Director has to sign, no acknowledgments are made in such instances.

## RECOMMENDATION:

For information.

DCM:dkp (2)

SENT DIRECTOR

8-19-61

XEROX

CORRESPONDENCE

This letter contained personal information and should have been acknowledged.

PERS. FILE



UNITED STATES GOVERNMENT

## Memorandum

Tolson \_\_\_\_\_  
 Belmont \_\_\_\_\_  
 Mohr \_\_\_\_\_  
 Callahan \_\_\_\_\_  
 Conrad \_\_\_\_\_  
 DeLoach \_\_\_\_\_  
 Evans \_\_\_\_\_  
 Malone \_\_\_\_\_  
 Rosen \_\_\_\_\_  
 Sullivan \_\_\_\_\_  
 Tavel \_\_\_\_\_  
 Trotter \_\_\_\_\_  
 Tele. Room \_\_\_\_\_  
 Ingram \_\_\_\_\_  
 Gandy \_\_\_\_\_

TO : Mr. DeLoach

DATE: 9-26-61

FROM : D. C. Morrell *am?*

SUBJECT: SA DONALD C. MORRELL  
 Correspondence and Tours Section  
 Crime Records Division  
 HEALTH MATTER

In accordance with Bureau regulations I am submitting for record purposes the fact that I have consulted my personal physician, Dr. James E. Nolan, Washington Clinic, Washington, D. C. I have been experiencing pains in my right arm and shoulder, and Dr. Nolan has taken blood tests for diagnostic purposes. He believes that I have a blood uric condition which is causing inflammation of the joints resulting in some pain. He believes the matter can be cured by medication and diet. I had a blood test taken yesterday, 9-25-61, and consultation with him today, 9-26-61.

RECOMMENDATION:

For record purposes.

*am*

REC-144

67-421 047-145	
Searched _____	Numbered _____
3 SEP 28 1961	

DCM:dkp  
 (3) *dkp*

*95**3 / rack*

Assistant Attorney General J. Walter Yeagley

November 29, 1961

Director, FBI

DONALD C. MORRELL  
CORRESPONDENCE AND TOURS SECTION  
ASSISTANCE AFFORDED DEPARTMENT

Your memorandum of November 24 concerning the help Special Agent Donald C. Morrell was privileged to extend your associates was very considerate. I am glad he was able to assist you in your survey, and you may be certain that both of us appreciate your kind comments. If you require any further aid in this matter, do not hesitate to let us know.

1 - SA Donald C. Morrell - Enclosure

① Personnel file of SA Donald C. Morrell - Enclosure

NOTE: Mr. Morrell recently conducted members of the Department of Justice on a tour of the Crime Records, Administrative, and Files and Communications Divisions in connection with a survey of the type of automatic typewriters being used by the FBI. The group desired information for use in solving some of the Department's administrative problems.

HHA:cfn

(6)

Director, Federal Bureau of Investigation

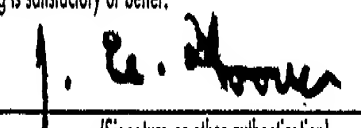
November 24, 1961

J. Walter Yeagley, Assistant Attorney General  
Internal Security Division

On November 21, a group from this Division visited your Crime Records Division to examine various types of automatic typewriting machines to ascertain which might best meet the needs of this Division.

I thought you would like to know that Mr. Donald Morrell was extremely helpful in this matter. His knowledge of the operating and technical aspects of these machines assisted my staff materially in making an evaluation. In addition, Mr. Morrell made the trip most interesting and pleasant.

Please accept my thanks for this help in solving one of our administrative problems.

1. Agency and organizational designations <b>FBI, U. S. DEPT. OF JUSTICE</b>						2. Payroll period		3. Block No.		4. Slip No.	
5. Employee's name (and social security account number when appropriate) <b>#08082 MR. DONALD C. MORRELL</b>						<b>SUPPLEMENTARY SA</b>		6. Grade and salary <b>GS 15 \$14,055</b>			
<b>PAYROLL CHANGE DATA</b>											
	BASE PAY	OVERTIME		GROSS PAY	RET.	FEDERAL TAX	BOND	F.I.C.A.	STATE TAX	GROUP LIFE INS.	NET PAY
7. Previous normal											
8. New normal											
9. Pay this period											
10. Remarks:								11. Appropriation(s)		12. Prepared by	
										13. Audited by	
<input checked="" type="checkbox"/> Periodic step-increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step-increase _____											
14. Effective date <b>12-10-61</b>	15. Date last equivalent increase <b>6-12-60</b>	16. Old salary rate <b>\$13,730</b>	17. New salary rate <b>\$14,055</b>	18. Performance rating is satisfactory or better.							
19. LWOP date (fill in appropriate spaces covering LWOP during following periods): Period(s): <input checked="" type="checkbox"/> No excess LWOP. Total excess LWOP _____				<div style="text-align: center;">             (Signature or other authentication)         </div> <div style="margin-top: 10px;"> <input type="checkbox"/> (Check applicable box in case of excess LWOP)  <input type="checkbox"/> In pay status at end of waiting period.  <input type="checkbox"/> In LWOP status at end of waiting period. <b>mbh</b> Initials of Clerk         </div>							

*Handwritten initials/signature*

December 8, 1961

PERSONAL

Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

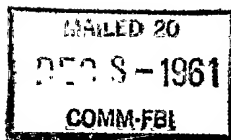
DEC 8 1 20 PM '61  
REC'D-READING ROOM  
FBI

Dear Mr. Morrell:

I want to take this opportunity to commend you for your excellent performance in handling the research and necessary correspondence in connection with the banquet and presentation ceremonies for the Criss Award on December 7, 1961. I know this was a difficult matter and I was very impressed with the splendid ability and judgment you displayed in discharging your responsibilities. I want you to know of my appreciation.

Sincerely yours,

J. Edgar Hoover



1 - Mr. DeLoach (Personal Attention)

1 -  (Sent Direct)

AFH:crt  
(5)  
67-421042

MAIL ROOM ☐ TELETYPE UNIT ☐

b6  
b7C

UNITED STATES GOVERNMENT

## Memorandum

TO : Mr. Callahan

DATE: 1-11-62

FROM : C. R. Davidson

SUBJECT: SA DONALD C. MORRELL  
 Section Chief  
 Correspondence and Tours Section  
 Crime Records Division  
 Veteran  
 EOD 8-18-47 Special Agent; GS-15, \$14,055

Tolson \_\_\_\_\_  
 Belmont \_\_\_\_\_  
 Mohr \_\_\_\_\_  
 Callahan \_\_\_\_\_  
 Conrad \_\_\_\_\_  
 DeLoach \_\_\_\_\_  
 Evans \_\_\_\_\_  
 Malone \_\_\_\_\_  
 Rosen \_\_\_\_\_  
 Sullivan \_\_\_\_\_  
 Tavel \_\_\_\_\_  
 Trotter \_\_\_\_\_  
 Tele. Room \_\_\_\_\_  
 Ingram \_\_\_\_\_  
 Gandy \_\_\_\_\_

The following is a brief summary of Mr. Morrell's record for the Director's use.

Mr. Morrell entered on duty 8-18-47 as a Special Agent and is presently in Grade GS-15, \$14,055 per annum. He has served in various field offices and has served as a Resident Agent. He was transferred to the Seat of Government and assigned to the Administrative Division on 3-16-53 and transferred to the Crime Records Division on 3-14-60. On 3-31-61 Mr. DeLoach rated him EXCELLENT. He is 43 years of age, is married, and has 2 children.

During the past year he has been COMMENDED on three occasions, the latest one being on 12-8-61 for his excellent performance in handling the research and necessary correspondence in connection with the banquet and presentation ceremonies for the Criss Award on 12-7-61. During this same period he was CENSURED on five occasions, the latest one being on 6-7-61 inasmuch as it had been noted that although he reviewed and approved a proposed outgoing letter dated 6-1-61 directed to [redacted] at Wallisville, Texas, he did not discover delinquencies that appeared in this item of correspondence. Material extraneous to the subject matter of the correspondence was being forwarded to [redacted] through error and, in addition, one of the enclosures had not been properly identified on the file copy of the outgoing letter.

The Director last saw him on 3-11-60 when he called to express his appreciation for the designation of Section Chief of the Correspondence and Tours Section of the Crime Records Division and the challenge which he believed his assignment offered him. The Director told Mr. Morrell that as he probably knew, the Director had not been entirely satisfied with the manner in which correspondence had been coming through from the Crime Records Division nor as to the entire handling of tours, and it was his responsibility to "dig" into the section and see there was a thorough streamlining in all aspects.

Since January, 1961, he has listed Washington, D. C., Portland, and Seattle as his Offices of Preference.

FDH:mbm  
 (2)

REC-138

Enclosure - Permanent Brief

67-	147
Searched	Numbered
1 JAN 12 1962	

THREE

✓ OVER

His weight is presently within desirable weight limits.

Latest information submitted 3-31-61 reflected he was interested in, available for, and considered completely qualified for administrative advancement. His qualifications were considered excellent.

His son, [REDACTED] was previously employed by the Bureau as a summer employee in 1960 and 1961. His services were satisfactory.

b6  
b7C

His daily average overtime was in excess of the division average 3 of the last 6 months and was as follows: June, 2 hours 36 minutes; July, 2 hours 46 minutes; August, 2 hours 54 minutes; September, 2 hours 31 minutes; October, 2 hours 39 minutes; November, 2 hours 41 minutes.

He supervises Bureau tours and handles correspondence from individuals outside the Bureau. He has approximately nine agents under his supervision.

*AFM* *WAC*  
*1/11*

January 18, 1962

PERSONAL

Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Morrell:

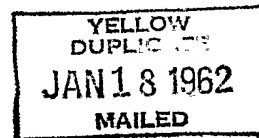
Thank you very much for your suggestion concerning a proposed airtel form for use in handling certain correspondence. I am indeed pleased to advise you that your proposal has been adopted and the necessary steps are being taken to place it into effect.

I want you to know I appreciate the interest and alertness you displayed in submitting this idea which will help streamline this phase of our operations.

Sincerely yours,

- 1 - Mr. DeLoach
- 1 - Personnel file of SA Donald C. Morrell

ML:jmh (Suggestion #473-62 dated 1/12/62)  
(5)



NOTE: Based on memoranda D. C. Morrell to Mr. DeLoach, DCM: mlw 1/12/62 and M. A. Jones to Mr. DeLoach, JMM:cmk, 1/15/62, Addendum by Training and Inspection Division, ML:jmh, 1/17/62, both re: Suggested Airtel for Use in Correspondence Matters.



RECEIPT FOR GOVERNMENT PROPERTY  
FEDERAL BUREAU OF INVESTIGATION  
UNITED STATES DEPARTMENT OF JUSTICE

March 12, 1962

I certify that I have ~~received~~ the following Government property for official use:  
returned

Key to Room 4718

READ

The Government property which you hereby acknowledge is charged to you and you are responsible for taking care of it and returning it when its use has been completed. DO NOT MARK OR WRITE ON IT OR MUTILATE IT IN ANY WAY.

Very truly yours,

FILE  
3-M

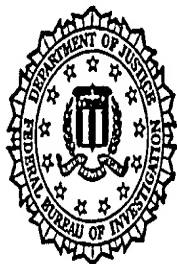
PER

(Written  
Signature)

*Donald C. Morrell*

(Typed  
Signature)

Donald C. Morrell



UNITED STATES DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION

WASHINGTON 25, D. C.

MAR 21 1962

In Reply, Please Refer to  
File No.

Director  
Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C.

RE: SA Donald C. Morrell  
(Type or print plainly)

Dear Sir:

For inclusion in the fund to be paid to the designated beneficiary of any Special Agent of the FBI who has previously contributed to this fund and who dies from any cause except self-destruction while employed as a Special Agent, I am forwarding herewith (by CHECK - MONEY ORDER) the sum of \$10, payable to the Assistant Director, Administrative Division, FBI, to be included in said fund. Payment will be made for death by self-destruction after the Agent has been a member of the fund for a continuous period of two years. It is understood and agreed that the sum tendered herewith is a voluntary, gratuitous contribution to said fund which I understand is to be administered in the following manner.

The Director of the FBI will appoint a committee which shall consider all matters pertaining to the acquisition, safe keeping and expending of said fund, which committee will recommend appropriate action to the Director in pertinent matters. The Assistant Director of the Administrative Division of the FBI shall receive all contributions and account for same to the Director. Upon the death of any Special Agent who is a member of said fund the appointed committee will consider the case and submit a recommendation to the Director as to its conclusions. Appropriate instructions will then be issued to the Assistant Director of the Administrative Division, directing him to pay to the designated beneficiary the sum of \$10,000. The liability of the fund shall not under any circumstances exceed the amount of monies in the fund at the time any liability shall occur. The following person is designated as my beneficiary for FBI Agents' Insurance Fund:

Name <b>Mrs. Elizabeth H. Morrell</b>	Relationship <b>Wife</b>	Date <b>3-6-62</b>
Address <b>5516 Charlcote Road, Bethesda, Maryland</b>		

The following person is designated as my beneficiary under the Chas. S. Ross Fund providing \$1500 death benefit to beneficiary of agents killed in the line of duty, other than travel accidents.

Name <b>Mrs. Elizabeth H. Morrell</b>	Relationship <b>Wife</b>	Date <b>3-6-62</b>
Address <b>5516 Charlcote Road, Bethesda, Maryland</b>		

Very truly yours,

*Donald C. Morrell*  
Special Agent

61-100000-13  
5

**Esso Standard**  
DIVISION OF



HUMBLE OIL & REFINING COMPANY

7720 YORK ROAD • BALTIMORE 4, MD.

DEL., MD., D. C. DIVISION  
CREDIT DEPARTMENT

4/16/62

MAILING ADDRESS  
P. O. BOX 1288, BALTIMORE 3, MD.

Federal Bureau of Investigation  
9th & Pa. Ave. N.W.  
Wash. 25, D.C.

Re: Donald Clark Morrell  
5516 Charlcoate Road  
Bethesda 14, Md.

Gentlemen:

The person named above has applied to us for credit. We are informed that the applicant is in your employ. It will be of considerable assistance to us in making our decision, as well as an accommodation to your employee, if you would be kind enough to furnish us with the answers to the questions below.

We shall appreciate your courtesy in replying, and assure you that the information furnished will be treated as strictly confidential. A prepaid envelope is enclosed for your convenience.

Very truly yours,

Position \_\_\_\_\_ Is it considered permanent? \_\_\_\_\_

Length of service \_\_\_\_\_ Approx. monthly income \$ \_\_\_\_\_  
Wage ☐  
Salary ☐  
Commission ☐

How often paid? \_\_\_\_\_

Does position require travel? \_\_\_\_\_

If so, do you reimburse expenses? \_\_\_\_\_

Age \_\_\_\_\_ Married \_\_\_\_\_ Single \_\_\_\_\_

Have you heard of any financial difficulties? \_\_\_\_\_

Would you recommend for credit? \_\_\_\_\_

Comments \_\_\_\_\_

GEN-MKT 21-5-78A

REC-140

How often? 4-21-62  
Searched 6 APR 20 1962

File with 147  
letter prep  
4-19-62  
ash

3-29

December 8, 1961

PERSONAL

Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

DEC 8 1 20 PM '61  
REC'D-READING ROOM  
FBI

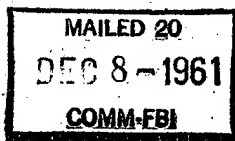
Dear Mr. Morrell:

I want to take this opportunity to commend you for your excellent performance in handling the research and necessary correspondence in connection with the banquet and presentation ceremonies for the Criss Award on December 7, 1961. I know this was a difficult matter and I was very impressed with the splendid ability and judgment you displayed in discharging your responsibilities. I want you to know of my appreciation.

Sincerely yours,

J. Edgar Hoover

67-421042-146



1 - Mr. DeLoach (Personal Attention)

1 -  (Sent Direct)

AFH:crt

(5)

67-421042

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Evans \_\_\_\_\_  
Malone \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Ingram \_\_\_\_\_  
Gandy \_\_\_\_\_

MAIL ROOM ☐ TELETYPE UNIT ☐

b6  
b7c

**FEDERAL BUREAU OF INVESTIGATION  
UNITED STATES DEPARTMENT OF JUSTICE**

REPORT OF PERFORMANCE RATING

*ref'd to section  
personnel*

Name of Employee: DONALD C. MORRELL

Where Assigned: Crime Records Division Correspondence and Tours Section  
(Division) (Section, Unit)

Official Position Title: Special Agent - Chief, Correspondence and Tours Section

Rating Period: from 4/1/61 to 3/31/62

ADJECTIVE RATING: EXCELLENT  
Outstanding, Excellent, Satisfactory, Unsatisfactory

Employee's  
Initials

*DCM*

Rated by: C. D. DeLoach Assistant Director 4/19/62  
Signature Title Date

Reviewed by: \_\_\_\_\_  
Signature Title Date

Rating Approved by: [Signature] \_\_\_\_\_  
Signature Title Date  
MAY 9 1962

TYPE OF REPORT **REC-132**

(☒) Official  
(☒) Annual

( ) Administrative  
( ) 60-Day  
( ) 90-Day  
( ) Transfer  
( ) Separation from Service  
( ) Special

67-7211-149  
Searched \_\_\_\_\_ Indexed \_\_\_\_\_  
3 APR 20 1962

8 MAY 11 1962

## NARRATIVE COMMENTS

Note: The regulations require that OUTSTANDING ratings be supported by a statement in writing setting forth IN DETAIL the performance IN EVERY ASPECT and the REASONS for considering each worthy of SPECIAL COMMENDATION. UNSATISFACTORY ratings must be supported by a statement in writing stating (1) WHEREIN the performance is unsatisfactory, (2) the facts of the (90 day) PRIOR WARNING, and (3) the efforts made AFTER THE WARNING TO HELP the employee bring his performance up to a satisfactory level.

# PERFORMANCE RATING GUIDE FOR INVESTIGATIVE PERSONNEL

(For use as attachment to Performance Rating Form No. FD-185)

Name of Employee Donald C. Morrell Title Special Agent  
 Rating Period: from 4/1/61 to 3/31/62

## RATING GUIDE AND CHECK-LIST

Note: Only those items having pertinent bearing on employee's performance should be rated. All employees in same salary grade should be compared. Rate items as follows:

- + Outstanding (exceeding excellent and deserving of special commendation).
- E Excellent.
- ✓ Satisfactory (good or very good).
- Unsatisfactory.
- No opportunity to appraise performance during rating period.

### Guide for determining adjective rating:

1. "Outstanding" adjective rating requires (A) that all rated elements be "+" and (B) that each and every rated element be factually justified by narrative detail on reverse of Form FD-185.
2. "Excellent," "Satisfactory" or "Unsatisfactory" adjective ratings will depend upon the composite result of evaluating all rated elements rather than following any mechanical formulas; however, for an employee to be rated "Excellent" he must not be rated unsatisfactory on any performance evaluation factors on the rating guide and check-list and must be rated "Excellent" or "Outstanding" on the majority of such rating factors. Good judgment must be exercised to insure that adjective rating is reasonable in the light of elements rated.
  - A. Any element rated "Unsatisfactory" must be supported by narrative comments.
  - B. An "official" adjective rating of "Unsatisfactory" must comply with the requirements described on the reverse of form FD-185.

- |   |   |
|---|---|
| <u>+</u> (1) Personal appearance.   | <u>E</u> (17) Firearms ability.   |
| <u>+</u> (2) Personality and effectiveness of his personal contacts.  | <u>○</u> (18) Development of informants and sources of information.   |
| <u>+</u> (3) Attitude (including dependability, cooperativeness, loyalty, enthusiasm, amenability and willingness to equitably share work load).  | <u>+</u> (19) Reporting ability:  |
| <u>+</u> (4) Physical fitness (including health, energy, stamina).  | <u>○</u> (a) Investigative reports  |
| <u>+</u> (5) Resourcefulness and ingenuity.   | <u>+</u> (b) Summary reports  |
| <u>+</u> (6) Forcefulness and aggressiveness as required.   | <u>+</u> (c) Memos, letters, wires  |
| <u>+</u> (7) Judgment, including common sense, ability to arrive at proper conclusions, ability to define objectives.   | (Consider: <u>+</u> conciseness; <u>+</u> clarity; <u>+</u> organization; <u>+</u> thoroughness; <u>+</u> accuracy; <u>+</u> adequacy and pertinency of leads; <u>-</u> administrative detail.) |
| <u>+</u> (8) Initiative and the taking of appropriate action on own responsibility.   | <u>○</u> (20) Performance as a witness.   |
| <u>+</u> (9) Planning ability and its application to the work.  | <u>+</u> (21) Executive ability:  |
| <u>E</u> (10) Accuracy and attention to pertinent detail.   | <u>+</u> (a) Leadership   |
| <u>+</u> (11) Industry, including energetic, consistent application to duties.  | <u>+</u> (b) Ability to handle personnel  |
| <u>+</u> (12) Productivity, including amount of acceptable work produced and rate of progress on or completion of assignments. Also consider adherence to deadlines unless failure to meet is attributable to causes beyond employee's control. | <u>+</u> (c) Planning   |
| <u>+</u> (13) Knowledge of duties, instructions, rules and regulations, including readiness of comprehension and "know how" of application.   | <u>+</u> (d) Making decisions   |
| <u>○</u> (14) Technical or mechanical skills.   | <u>+</u> (e) Assignment of work   |
| <u>○</u> (15) Investigative ability and results:  | <u>+</u> (f) Training subordinates  |
| <u>-</u> (a) Internal security cases  | <u>+</u> (g) Devising procedures  |
| <u>-</u> (b) Criminal or general investigative cases  | <u>+</u> (h) Emotional stability  |
| <u>-</u> (c) Fugitive cases   | <u>+</u> (i) Promoting high morale  |
| <u>-</u> (d) Applicant cases  | <u>+</u> (j) Getting results  |
| <u>○</u> (16) Physical surveillance ability.  | <u>○</u> (22) Ability on raids and dangerous assignments:   |
|   | <u>-</u> (a) As leader  |
|   | <u>-</u> (b) As participant   |
|   | <u>+</u> (23) Organizational interest, such as making of suggestions for improvement.   |
|   | <u>+</u> (24) Ability to work under pressure.   |
|   | <u>-</u> (25) Miscellaneous. Specify and rate:  |
|   | <u>-</u> Dictation ability <u>-</u>   |

A. Specify general nature of assignment during most of rating period (such as security, criminal, applicant, squad, or as Resident Agent, supervisor, instructor, etc.): Section Chief - Correspondence and Tours Section

B. Specify employee's most noteworthy special talents (such as investigator, desk man, research, instructor, speaker): Desk Man - Lecturer

- C. (1) Is employee available for general assignment wherever needs of service require? Yes (If answer is not "yes," explain in narrative comments.)  
 (2) Is employee available for special assignment wherever needs of service require? Yes (If answer is not "yes," explain in narrative comments.)

D. 1. Has employee had an abnormal sick leave record during rating period? NO 2. Has employee used more sick leave (including annual leave or LWOP for illness) during rating period than the amount of sick leave earned during such period? NO (If answer to either question is "Yes," explain in narrative comments.)

E. Is employee qualified to operate a motor vehicle incidental to his official duties? ☒ Yes ☐ No  
 If answer is "yes," personnel file must reflect the following: (a) Has valid State or local operator's license for type vehicle he is to use. (b) Is physically fit to drive. (c) Past safe driving record OK or has passed Bureau road test.

ADJECTIVE RATING: EXCELLENT EMPLOYEE'S INITIALS DCM  
 Outstanding, Excellent, Satisfactory, Unsatisfactory

April 18, 1962

DONALD C. MORRELL

Special Agent - Section Chief  
Correspondence and Tours Section  
Crime Records Division

PART I GENERAL COMMENTS:

Section Chief Morrell makes an outstanding appearance. His personality is above average. I particularly like his aggressiveness, loyalty and his amenability to discipline. He follows and transmits orders well. He has taken 15 hours of sick leave since the last rating period.

This man conforms well to policy and is obviously well versed in procedure. He continues to make progress in his job as Section Chief and has been particularly alert as to the suggestion of ideas for streamlining purposes.

During the rating period, Section Chief Morrell has been censured twice. These censures resulted from preparation of an annual performance rating in which an Agent was rated higher than letters of censure in his file warranted. Mr. Morrell evaluated this Agent's performance from the tremendous volume he had handled and, therefore, arrived at what he believed was a fair conclusion. His second letter of censure was received as a result of reviewing an outgoing communication. In view of the tremendous volume daily handled by this Section Chief, this dereliction is not considered to be serious.

Mr. Morrell has been commended on two occasions during the rating period for his excellent performance in handling the research and necessary correspondence in connection with a banquet and presentation ceremonies for the "Criss Award" on December 7, 1961, and for a suggestion which was adopted in handling certain correspondence.

This Section Chief is presently within desirable weight limits, contributes a considerable amount of necessary overtime and demands and receives complete respect and absolute good discipline from his subordinates. He has an excellent capacity for rapidly analyzing problems and arriving at sound conclusions. His memoranda explaining deficiencies were at first somewhat lengthy, however, recently have been more analytical and objective.

*DCM*



DONALD C. MORRELL

Part I, General Comments (Continued)

I firmly believe this man is rapidly developing into a very excellent administrator and Section Chief. His ability to adopt new strategy and plunge ahead for the good of the Bureau should not be underestimated.

I consider this man to be rated "Excellent" and that he well deserves this rating.

DCM

## PART II SPECIFIC COMMENTS

1. Justification for Any Minus Ratings Given

N. A.

2. Experience and Ability as Inspector's Aide

Mr. Morrell is a qualified Inspector's Aide but was not given any inspection assignments during the rating period because of the absolute necessity to keep him at his desk.

3. Participation in Informant Programs

N. A.

4. Testifying Experience and Ability

This man has had no opportunity to testify during the rating period, but he has had the opportunity to testify in the past and performed in an above-average manner.

5. Disciplinary Action

As stated in Part I, this Agent received two letters of censure during the rating period.

6. Accounting Information

N. A.

7. Police Instruction

N. A. However, this Agent has a definite asset as a lecturer and can be used in this category at any time.

8. Sound Training

N. A.

9. Resident Agents

N. A.

10. Foreign Language Ability

N. A.

*JCM*

11. Administrative Advancement

Is Agent (a) interested in (Yes X No \_\_\_\_), (b) completely available for (Yes X No \_\_\_\_), and (c) considered completely qualified at present for administrative advancement including experience, ability, personality, and appearance? (Yes X No \_\_\_\_). (d) If answer to (c) is "Yes," would you consider his qualifications very good \_\_\_\_, excellent X, outstanding \_\_\_\_.

(e) If answer to (c) is "No," does he have potential for future administrative advancement? (Yes \_\_\_\_ No \_\_\_\_).

Dem

# AMERICAN EXPRESS COMPANY

CREDIT CARD DEPARTMENT  
CREDIT DIVISION



TRAVELERS CHEQUES  
MONEY ORDERS FOREIGN REMITTANCES  
TRAVEL FOREIGN SHIPPING  
CREDIT CARDS

P. O. Box 36  
CHURCH STREET STATION  
NEW YORK 8, N. Y.  
TELEPHONE: DIgBY 9-1818

April 23, 1962 hp

Federal Bureau of Investigation  
Justice Bldg. 9th St. & Penna. NW  
Washington 25, D.C.

RE: Donald Clark Morrell  
5516 Charlcoate Rd.  
Bethesda 14, Md.

ATT: Personnel Manager;

The person named above, in applying for an American Express Credit Card, has indicated present or past employment with your company. Since we have been unable to verify this fact through our usual sources, may we ask your cooperation in replying to the questions listed below. A self-addressed envelope is enclosed for your convenience.

Your cooperation in this matter may assist the applicant in securing a Credit Card and we wish to assure you that this information will be held in strictest confidence.

Very truly yours,



b6  
b7C

Credit Division

PLEASE DO NOT DETACH

EMPLOYMENT: From \_\_\_\_\_ to \_\_\_\_\_

AGE \_\_\_\_\_ No. of Dependents \_\_\_\_\_

INCOME: Monthly Salary\$ \_\_\_\_\_ Commission\$ \_\_\_\_\_ Expense ☐ yes  
Account ☐ no

If exact earnings cannot be given please indicate if gross annual earnings are: Below \$7,500 ☐ \$7,500-\$8,500 ☐ \$8,500-\$10,000 ☐ over \$10,000 ☐

Would you recommend for credit? ☐ yes ☐ no

Authorizing Signature \_\_\_\_\_

## PAST SAFE DRIVING RECORD CERTIFICATION

NAME OF OPERATOR (PRINT - LAST, FIRST, MIDDLE INITIAL)

Morrell, Donald C.

DATE

4-30-62

DIVISION AND SECTION ASSIGNED

Crime Records, Correspondence &amp; Tours

POSITION TITLE

Special Agent

THIS IS TO CERTIFY THAT I PRESENTLY ☒ HOLD ☐ DO NOT HOLD A VALID MOTOR VEHICLE OPERATOR'S PERMIT OR DRIVER'S LICENSE.

PERMIT ISSUED BY:

(STATE, TERRITORY  
POSSESSION, DISTRICT)

Maryland

PERMIT NUMBER

M 652 149 119 442

PERMIT EXPIRES

6-62

THIS IS AN UNRESTRICTED (~~RESTRICTED~~) PERMIT. (IF RESTRICTED, EXPLAIN BELOW)  
(STRIKE OUT ONE)THIS FURTHER CERTIFIES THAT DURING THE PAST THREE YEARS I HAVE DRIVEN A MOTOR VEHICLE (GOVERNMENT OR PERSONALLY OWNED) APPROXIMATELY 12,000 MILES. DURING THIS TIME (A) I ☐ HAVE ☒ HAVE NOT RECEIVED A TRAFFIC VIOLATION TICKET; (B) I ☐ HAVE ☒ HAVE NOT BEEN HELD AT FAULT\* AS THE DRIVER OF A MOTOR VEHICLE INVOLVED IN A TRAFFIC ACCIDENT. IF AFFIRMATIVE ANSWER, PLEASE EXPLAIN IN ADJACENT SPACE GIVING NUMBER AND DATES OF OFFENSES.

\* "AT FAULT" MEANS ANY CASE IN WHICH RESPONSIBILITY IS CONCEDED BY EMPLOYEE OR HIS INSURANCE COMPANY OR LIABILITY IS FIXED BY DULY CONSTITUTED AUTHORITY.

*Donald C. Morrell*

SIGNATURE OF OPERATOR

NAME OF REVIEWING OFFICIAL

C. D. DeLoach

(PRINT - LAST, FIRST, MIDDLE INITIAL)

POSITION TITLE

Assistant Director

DATE

MAY 10 1962

THE PERSONNEL FILE OF THIS EMPLOYEE HAS BEEN REVIEWED AND REFLECTS THE FOLLOWING INFORMATION CONCERNING THE OPERATION OF A MOTOR VEHICLE ON OFFICIAL BUSINESS DURING THE PAST THREE YEARS:



CONTINUOUS SAFE DRIVING RECORD



INVOLVED IN TRAFFIC ACCIDENT AND FOUND AT FAULT \*\*

I CERTIFY THAT THIS EMPLOYEE IS:



QUALIFIED ON THE BASIS OF HIS SAFE DRIVING RECORD TO OPERATE MOTOR VEHICLES ON OFFICIAL BUSINESS.



NOT QUALIFIED AND MUST DEMONSTRATE HIS QUALIFICATIONS BY SATISFACTORILY PASSING A ROAD TEST EXAMINATION BEFORE OPERATING A MOTOR VEHICLE ON OFFICIAL BUSINESS.

REMARKS:

67-NOV 11 1962  
MAY 28 1962

\* "AT FAULT" MEANS ANY CASE IN WHICH THE BUREAU HAS TAKEN DISCIPLINARY ADMINISTRATIVE ACTION AGAINST THE EMPLOYEE.

*C. D. DeLoach*

(SIGNATURE OF REVIEWING OFFICIAL)

April 26, 1962

American Express Company  
P. O. Box 36  
Church Street Station  
New York 8, New York

Attention: Division Four

Gentlemen:

Receipt is acknowledged of your inquiry dated April 23, 1962, regarding Mr. Donald Clark Morrell.

Mr. Morrell entered on duty in the Federal Bureau of Investigation August 18, 1947, as a Special Agent. He is presently occupying the position of Supervisory Special Agent and is receiving salary of \$14,055 per annum. His position in this Bureau is of a permanent nature. Our records indicate his date of birth is June 13, 1918.

Very truly yours,

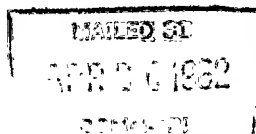
John Edgar Hoover  
Director

*adh* (3)  
67-421042

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Evans \_\_\_\_\_  
Malone \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

*446 SP 2 05 PM '62*

**REC'D FBI**  
*WVIF ROOM*



MAIL ROOM ☐ TELETYPE UNIT ☐

*Handwritten signature/initials*

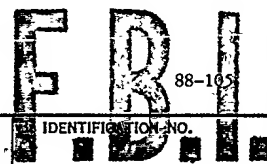
*Handwritten signature/initials*

*Handwritten initials*

*Handwritten initials*

REPORT OF MEDICAL EXAMINATION

# 8



1. LAST NAME—FIRST NAME—MIDDLE NAME <b>MORRELL DONALD CLARK</b>		2. GRADE AND COMPONENT OR POSITION <b>FBI</b>		IDENTIFICATION NO.	
4. HOME ADDRESS (Number, street or RFD, city or town, zone and State) <b>WMC</b>		5. PURPOSE OF EXAMINATION <b>ANNUAL PHYSICAL</b>		6. DATE OF EXAMINATION <b>5-4-62</b>	
7. SEX <b>M</b>	8. RACE <b>W</b>	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY _____ CIVILIAN _____		10. AGENCY	
11. ORGANIZATION UNIT		12. DATE OF BIRTH <b>JUNE 13, 1918</b>		13. PLACE OF BIRTH <b>BROOKLYN, N.Y.</b>	
14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN		15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS <b>WMC</b>		16. OTHER INFORMATION	
17. RATING OR SPECIALTY		TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS	

CLINICAL EVALUATION		
NOR-MAL	(Check each item in appropriate column; enter "NE" if not evaluated.)	ABNOR-MAL
	18. HEAD, FACE, NECK, AND SCALP	
	19. NOSE	
	20. SINUSES	
	21. MOUTH AND THROAT	
	22. EARS—GENERAL (Int. & ext. canals) (Auditory acuity under items 70 and 71)	
	23. DRUMS (Perforation)	
	24. EYES—GENERAL (Visual acuity and refraction under items 69, 60 and 67)	
NE	25. OPHTHALMOSCOPIC	
	26. PUPILS (Equality and reaction)	
	27. OCULAR MOTILITY (Associated parallel movements, nystagmus)	
	28. LUNGS AND CHEST (Include breasts)	
	29. HEART (Thrust, size, rhythm, sounds)	
	30. VASCULAR SYSTEM (Varicosities, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Hemorrhoids, fistulae) (Prostate, if indicated)	
	33. ENDOCRINE SYSTEM	
	34. G-U SYSTEM	
	35. UPPER EXTREMITIES (Strength, range of motion)	
	36. FEET	
	37. LOWER EXTREMITIES (Except feet) (Strength, range of motion)	
	38. SPINE, OTHER MUSCULOSKELETAL	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. SKIN, LYMPHATICS	
	41. NEUROLOGIC (Equilibrium tests under item 72)	
	42. PSYCHIATRIC (Specify any personality deviation)	
	43. PELVIC (Females only) (Check how done) <input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES. (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

REC-140

ENCLOSURE

3/15/62

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)																	REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES	
O—Restorable teeth —Nonrestorable teeth X—Missing teeth XXX—Replaced by dentures (6 X 8)—Fixed bridge, brackets to include abutments																		
R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	L	no defects noted 7-1-62-151
RIGHT	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	E	

LABORATORY FINDINGS

45. URINALYSIS: A. SPECIFIC GRAVITY <b>1.022</b>		46. CHEST X-RAY (Place, date, film number and result) <b>No change since June 1961.</b>	
B. ALBUMIN <b>Neg.</b>		D. MICROSCOPIC <b>Neg.</b>	
C. SUGAR <b>Neg.</b>		49. BLOOD TYPE AND RH FACTOR <b>WNL</b>	
47. SEROLOGY (Specify test used and result) <b>Neg.</b>		50. OTHER TESTS <b>Left shoulder X-ray - See report.</b>	

gaw



# MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT 67		52. WEIGHT 158		53. COLOR HAIR BRN		54. COLOR EYES Blue		55. BUILD: <input type="checkbox"/> SLENDER <input type="checkbox"/> MEDIUM <input checked="" type="checkbox"/> HEAVY <input type="checkbox"/> OBESE		56. TEMPERATURE 98.7	
57. BLOOD PRESSURE (Arm at heart level)						58. PULSE (Arm at heart level)					
A. SITTING SYS. 110 DIAS. 70		B. RECUMBENT SYS. DIAS.		C. STANDING (3 min.) SYS. DIAS.		A. SITTING 74		B. AFTER EXERCISE		C. 2 MIN. AFTER	
59. DISTANT VISION		60. REFRACTION		61. 7.5 M NEAR VISION							
RIGHT 20/20 CORR. TO 20/		BY S. OX		20 TO 8 CORR. TO		BY					
LEFT 20/20 CORR. TO 20/		BY S. OX		20 TO 8 CORR. TO		BY					
62. HETEROPHORIA (Specify distance)											
ES°		EX°		R. H.		L. H.		PRISM DIV.		PRISM CONV. CT	
63. ACCOMMODATION		64. COLOR VISION (Test used and result) AOC 1440 17/18				65. DEPTH PERCEPTION (Test used and score)		UNCORRECTED		CORRECTED	
RIGHT LEFT											
66. FIELD OF VISION		67. NIGHT VISION (Test used and score)				68. RED LENS TEST		69. INTRAOCULAR TENSION			
70. HEARING		71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)			
RIGHT WV 15 /15 SV 15 /15		250 266 300 312 1000 1024 2000 2048 3000 2896 4000 4096 6000 6144 8000 8192									
LEFT WV 15 /15 SV 15 /15		RIGHT LEFT									

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

77. EXAMINEE (Check)

A. ☒ IS QUALIFIED FOR  
B. ☐ IS NOT QUALIFIED FOR

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

79. TYPED OR PRINTED NAME OF PHYSICIAN

80. TYPED OR PRINTED NAME OF PHYSICIAN

81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)

82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY

76. A. PHYSICAL PROFILE

P	U	L	H	E	S

B. PHYSICAL CATEGORY

A	B	C	E

SIGNATURE

SIGNATURE

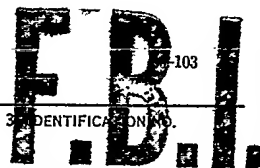
SIGNATURE

SIGNATURE

NUMBER OF ATTACHED SHEETS

# REPORT OF MEDICAL HISTORY

THIS INFORMATION IS FOR OFFICIAL USE ONLY AND WILL NOT BE RELEASED TO UNAUTHORIZED PERSONS



1. LAST NAME—FIRST NAME—MIDDLE NAME <b>DONALD CLARK MORRELL</b>			2. GRADE AND COMPONENT OR POSITION <b>SPECIAL AGENT FBI</b>		3. IDENTIFICATION NO.
4. HOME ADDRESS (Number, street or RFD, city or town, zone and State) <b>5516 CHARLCOTE ROAD, BETHESDA, MD.</b>			5. PURPOSE OF EXAMINATION <b>ANNUAL PHYSICAL</b>		6. DATE OF EXAMINATION <b>5-4-62</b>
7. SEX <b>M</b>	8. RACE <b>W</b>	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY _____ CIVILIAN _____		10. AGENCY <b>FBI</b>	11. ORGANIZATION UNIT
12. DATE OF BIRTH <b>JUNE 13, 1918</b>		13. PLACE OF BIRTH <b>BROOKLYN, N.Y.</b>		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS				16. OTHER INFORMATION	

17. STATEMENT OF EXAMINEE'S PRESENT HEALTH IN OWN WORDS. (Follow by description of past history, if complaint exists)

**GOOD - BOTHERED IN RECENT MONTHS BY SEVERE PAINS IN LEFT SHOULDER, OF BURSTITIS TYPE. ALSO BY CATARRHAL DRIP**

18. FAMILY HISTORY					19. HAS ANY BLOOD RELATION (Parent, brother, sister, other) OR HUSBAND OR WIFE:			
RELATION	AGE	STATE OF HEALTH	IF DEAD, CAUSE OF DEATH	AGE AT DEATH	YES	NO	(Check each item)	RELATION(S)
FATHER	-	-	<b>CORONARY OCCUSION</b>	<b>61</b>		<input checked="" type="checkbox"/>	HAD TUBERCULOSIS	
MOTHER	<b>70</b>	<b>GOOD</b>				<input checked="" type="checkbox"/>	HAD SYPHILIS	
SPOUSE	<b>43</b>	<b>GOOD</b>				<input checked="" type="checkbox"/>	HAD DIABETES	
	<b>46</b>	<b>GOOD</b>				<input checked="" type="checkbox"/>	HAD CANCER	
<del>BROTHERS</del>						<input checked="" type="checkbox"/>	HAD KIDNEY TROUBLE	
<del>AND</del>					<input checked="" type="checkbox"/>		HAD HEART TROUBLE	<b>FATHER; DAUGHTER</b>
<del>SISTERS</del>						<input checked="" type="checkbox"/>	HAD STOMACH TROUBLE	<b>RHEUMATIC FEVER</b>
						<input checked="" type="checkbox"/>	HAD RHEUMATISM (Arthritis)	
CHILDREN		<b>Good</b>			<input checked="" type="checkbox"/>		HAD ASTHMA, HAY FEVER, HIVES	<b>WIFE</b>
		<b>Good</b>				<input checked="" type="checkbox"/>	HAD EPILEPSY (Fits)	
						<input checked="" type="checkbox"/>	COMMITTED SUICIDE	
						<input checked="" type="checkbox"/>	BEEN INSANE	

20. HAVE YOU EVER HAD OR HAVE YOU NOW (Place check at left of each item)

YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)
<input checked="" type="checkbox"/>		SCARLET FEVER, ERYSIPELAS	<input checked="" type="checkbox"/>		GOITER	<input checked="" type="checkbox"/>		TUMOR, GROWTH, CYST, CANCER	<input checked="" type="checkbox"/>		"TRICK" OR LOCKED KNEE
<input checked="" type="checkbox"/>		DIPHTHERIA	<input checked="" type="checkbox"/>		TUBERCULOSIS	<input checked="" type="checkbox"/>		RUPTURE	<input checked="" type="checkbox"/>		FOOT TROUBLE
<input checked="" type="checkbox"/>		RHEUMATIC FEVER	<input checked="" type="checkbox"/>		SOAKING SWEATS (Night sweats)	<input checked="" type="checkbox"/>		APPENDICITIS	<input checked="" type="checkbox"/>		NEURITIS
<input checked="" type="checkbox"/>		SWOLLEN OR PAINFUL JOINTS	<input checked="" type="checkbox"/>		ASTHMA	<input checked="" type="checkbox"/>		PILES OR RECTAL DISEASE	<input checked="" type="checkbox"/>		PARALYSIS (Inc. infantile)
<input checked="" type="checkbox"/>		MUMPS	<input checked="" type="checkbox"/>		SHORTNESS OF BREATH	<input checked="" type="checkbox"/>		FREQUENT OR PAINFUL URINATION	<input checked="" type="checkbox"/>		EPILEPSY OR FITS
<input checked="" type="checkbox"/>		WHOOPING COUGH	<input checked="" type="checkbox"/>		PAIN OR PRESSURE IN CHEST	<input checked="" type="checkbox"/>		KIDNEY STONE OR BLOOD IN URINE	<input checked="" type="checkbox"/>		CAR, TRAIN, SEA, OR AIR SICKNESS
<input checked="" type="checkbox"/>		FREQUENT OR SEVERE HEADACHE	<input checked="" type="checkbox"/>		CHRONIC COUGH	<input checked="" type="checkbox"/>		SUGAR OR ALBUMIN IN URINE	<input checked="" type="checkbox"/>		FREQUENT TROUBLE SLEEPING
<input checked="" type="checkbox"/>		DIZZINESS OR FAINTING SPELLS	<input checked="" type="checkbox"/>		PALPITATION OR POUNDING HEART	<input checked="" type="checkbox"/>		BOILS	<input checked="" type="checkbox"/>		FREQUENT OR TERRIFYING NIGHTMARES
<input checked="" type="checkbox"/>		EYE TROUBLE	<input checked="" type="checkbox"/>		HIGH OR LOW BLOOD PRESSURE	<input checked="" type="checkbox"/>		VENEREAL DISEASE	<input checked="" type="checkbox"/>		DEPRESSION OR EXCESSIVE WORRY
<input checked="" type="checkbox"/>		EAR, NOSE OR THROAT TROUBLE	<input checked="" type="checkbox"/>		CRAMPS IN YOUR LEGS	<input checked="" type="checkbox"/>		RECENT GAIN OR LOSS OF WEIGHT	<input checked="" type="checkbox"/>		LOSS OF MEMORY OR AMNESIA
<input checked="" type="checkbox"/>		RUNNING EARS	<input checked="" type="checkbox"/>		FREQUENT INDIGESTION	<input checked="" type="checkbox"/>		ARTHRITIS OR RHEUMATISM	<input checked="" type="checkbox"/>		BED WETTING
<input checked="" type="checkbox"/>		CHRONIC OR FREQUENT COLDS	<input checked="" type="checkbox"/>		STOMACH, LIVER OR INTESTINAL TROUBLE	<input checked="" type="checkbox"/>		BONE, JOINT, OR OTHER DEFORMITY	<input checked="" type="checkbox"/>		NERVOUS TROUBLE OF ANY SORT
<input checked="" type="checkbox"/>		SEVERE TOOTH OR GUM TROUBLE	<input checked="" type="checkbox"/>		GALL BLADDER TROUBLE OR GALL STONES	<input checked="" type="checkbox"/>		LAMENESS	<input checked="" type="checkbox"/>		ANY DRUG OR NARCOTIC HABIT
<input checked="" type="checkbox"/>		SINUSITIS	<input checked="" type="checkbox"/>		JAUNDICE	<input checked="" type="checkbox"/>		LOSS OF ARM, LEG, FINGER, OR TOE	<input checked="" type="checkbox"/>		EXCESSIVE DRINKING HABIT
<input checked="" type="checkbox"/>		HAY FEVER	<input checked="" type="checkbox"/>		ANY REACTION TO SERUM, DRUG OR MEDICINE	<input checked="" type="checkbox"/>		PAINFUL OR "TRICK" SHOULDER OR ELBOW	<input checked="" type="checkbox"/>		HOMOSEXUAL TENDENCIES

21. HAVE YOU EVER (Check each item)

<input checked="" type="checkbox"/>	WORN GLASSES	<input checked="" type="checkbox"/>	ATTEMPTED SUICIDE
<input checked="" type="checkbox"/>	WORN AN ARTIFICIAL EYE	<input checked="" type="checkbox"/>	BEEN A SLEEP WALKER
<input checked="" type="checkbox"/>	WORN HEARING AIDS	<input checked="" type="checkbox"/>	LIVED WITH ANYONE WHO HAD TUBERCULOSIS
<input checked="" type="checkbox"/>	STUTTERED OR STAMMERED	<input checked="" type="checkbox"/>	COUGHED UP BLOOD
<input checked="" type="checkbox"/>	WORN A BRACE OR BACK SUPPORT	<input checked="" type="checkbox"/>	BLED EXCESSIVELY AFTER INJURY OR TOOTH EXTRACTION

22. FEMALES ONLY: A. HAVE YOU EVER—

<input type="checkbox"/>	BEEN PREGNANT	<input type="checkbox"/>	AGE AT ONSET OF MENSTRUATION
<input type="checkbox"/>	HAD A VAGINAL DISCHARGE	<input type="checkbox"/>	INTERVAL BETWEEN PERIODS
<input type="checkbox"/>	BEEN TREATED FOR A FEMALE DISORDER	<input type="checkbox"/>	DURATION OF PERIODS
<input type="checkbox"/>	HAD PAINFUL MENSTRUATION	<input type="checkbox"/>	DATE OF LAST PERIOD
<input type="checkbox"/>	HAD IRREGULAR MENSTRUATION	QUANTITY: <input type="checkbox"/> NORMAL <input type="checkbox"/> EXCESSIVE <input type="checkbox"/> SCANTY	

23. HOW MANY JOBS HAVE YOU HAD IN THE PAST THREE YEARS?

**ONE**

24. WHAT IS THE LONGEST PERIOD YOU HELD ANY OF THESE JOBS?

MONTHS **15 Y 20**

25. WHAT IS YOUR USUAL OCCUPATION?

**SPECIAL AGENT FBI**

26. ARE YOU (Check one)

☒ RIGHT HANDED ☐ LEFT HANDED

ENCLOSURE

67-47100-151 gclm

YES	NO	CHECK EACH ITEM YES OR NO. EVERY ITEM CHECKED "YES" MUST BE FULLY EXPLAINED IN BLANK SPACE ON RIGHT
		27. HAVE YOU BEEN UNABLE TO HOLD A JOB BECAUSE OF:
		A. SENSITIVITY TO CHEMICALS, DUST, SUNLIGHT, ETC.
		B. INABILITY TO PERFORM CERTAIN MOTIONS
		C. INABILITY TO ASSUME CERTAIN POSITIONS
		D. OTHER MEDICAL REASONS (If yes, give reasons)
		28. HAVE YOU EVER WORKED WITH RADIOACTIVE SUBSTANCE?
		29. DID YOU HAVE DIFFICULTY WITH SCHOOL STUDIES OR TEACHERS? (If yes, give details)
		30. HAVE YOU EVER BEEN REFUSED EMPLOYMENT BECAUSE OF YOUR HEALTH? (If yes, state reason and give details)
		31. HAVE YOU EVER BEEN DENIED LIFE INSURANCE? (If yes, state reason and give details)
		32. HAVE YOU HAD, OR HAVE YOU BEEN ADVISED TO HAVE, ANY OPERATIONS? (If yes, describe and give age at which occurred)
		33. HAVE YOU EVER BEEN A PATIENT (committed or voluntary) IN A MENTAL HOSPITAL OR SANATORIUM? (If yes, specify when, where, why, and name of doctor, and complete address of hospital or clinic)
		34. HAVE YOU EVER HAD ANY ILLNESS OR INJURY OTHER THAN THOSE ALREADY NOTED? (If yes, specify when, where, and give details)
		35. HAVE YOU CONSULTED OR BEEN TREATED BY CLINICS, PHYSICIANS, HEALERS, OR OTHER PRACTITIONERS WITHIN THE PAST 5 YEARS? (If yes, give complete address of doctor, hospital, clinic, and details)
		36. HAVE YOU TREATED YOURSELF FOR ILLNESSES OTHER THAN MINOR COLDS? (If yes, which illnesses)
		37. HAVE YOU EVER BEEN REJECTED FOR MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date and reason for rejection)
		38. HAVE YOU EVER BEEN DISCHARGED FROM MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date, reason, and type of discharge: whether honorable, other than honorable, for unfitness or unsuitability)
		39. HAVE YOU EVER RECEIVED, IS THERE PENDING, HAVE YOU APPLIED FOR, OR DO YOU INTEND TO APPLY FOR PENSION OR COMPENSATION FOR EXISTING DISABILITY? (If yes, specify what kind, granted by whom, and what amount, when, why)

To A AGE 5

Yes. Dr. JAMES NOLAN, WASHINGTON CLINIC  
TENDONITIS RIGHT ELBOW (HE ALSO SUSPECTED GOUT)  
about Nov 1961 - no recurrence.

I CERTIFY THAT I HAVE REVIEWED THE FOREGOING INFORMATION SUPPLIED BY ME AND THAT IT IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.  
I AUTHORIZE ANY OF THE DOCTORS, HOSPITALS, OR CLINICS MENTIONED ABOVE TO FURNISH THE GOVERNMENT A COMPLETE TRANSCRIPT OF MY MEDICAL RECORD FOR PURPOSES OF PROCESSING MY APPLICATION FOR THIS EMPLOYMENT OR SERVICE.

TYPED OR PRINTED NAME OF EXAMINEE

SIGNATURE

DONALD CLARK MORRELL

Donald Clark Morrell

40. PHYSICIAN'S SUMMARY AND ELABORATION OF ALL PERTINENT DATA (Physician shall comment on all positive answers in items 20 thru 39)

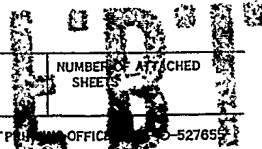
# 3 scarlet fever - 1949  
no diphtheria  
whooping cough } Childhood - good recoveries  
measles  
post nasal drainage } for about past yrs - has had no treatment  
"sinusitis"  
# 21 reading glasses.  
# 25 as above; also pain in left shoulder for about past 3 mos  
occasional elevation of arm. No treatment.

TYPED OR PRINTED NAME OF PHYSICIAN OR EXAMINER

DATE

SIGNATURE

5-4-62



PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME		REGISTER NO.	WARD NO.
MORRELL, Donald C. F.B.I.			STAFF CLNC
AGE	SEX	(Check one) <input type="checkbox"/> PRDSIDE, WHEELCHAIR, OR STRETCHER <input type="checkbox"/> BED PATIENT <input type="checkbox"/> AMBULATORY	
EXAMINATION REQUESTED			
REQUESTED BY			DATE OF REQUEST
			5/4/62

(Above space for mechanical imprinting, if used)

PERTINENT CLINICAL HISTORY, OPERATIONS, PHYSICAL FINDINGS, AND PROVISIONAL DIAGNOSIS

FILM NO.	11664	DATE OF REPORT
----------	-------	----------------

RADIOGRAPHIC REPORT

LEFT SHOULDER: 4 MAY 1962. Internal and external rotation views fail to reveal evidence of bone or joint abnormality. In particular, there is no evidence of soft tissue calcification, PAX PJA:pas

Department of Radiology  
U.S. Naval Hospital  
National Naval Medical Center  
Bethesda 14, Maryland

*[Signature]*  
E. J. ANASTASIA  
LT MC USN

SIGNATURE: (Specify location of laboratory if not part of requesting facility)

Standard Form 519A (Rev. Aug 1964)  
Promulgated by Bureau of the Budget  
Circular A 53 (Rev)

RADIOGRAPHIC REPORT  
519-205

(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)

ENCLOSURE

67-421642-157 *gem*

**Attachment to Standard Form 88, Report of Medical Examination  
For Information and Guidance of Medical Examiner**

Name of Examinee  
(Type or print)

MORRELL

Last

DONALD

First

C

Middle

The following portions of the attached examination report form need not be completed:

2	14	68
3	17	69
4	62	72
9	65	76
11	67	

46. Is necessary unless facilities for affording same are not readily available.
48. Not required unless examinee is over 35 years of age or examination indicates such is desirable.
49. Is necessary unless facilities for affording same are not readily available.
71. Audiometer examinations should be afforded whenever possible for all Special Agent applicants and Special Agents. Applicants for the Special Agent position will not be accepted if the hearing loss exceeds a 15 decibel average in each ear in the conversational speech range (500, 1000, 2000 cycles).

**For All Examinees, Whether Clerical or Special Agent Applicants or Employees:**

*The medical examiner should answer the following question:*

Examinee ☒ is ☐ is not qualified for strenuous physical exertion.

**To be Answered in the Case of All Male Employees and Male Applicants:**

1. Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

2. Does examinee have any defects prohibiting safe operation of motor vehicles?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

If examinee has defective vision, should he wear corrective glasses while operating a motor vehicle? ☐ Yes ☐ No

ENCLOSURE

15/10/64

REC'D - ADM. DIV.  
Desirable Weight Ranges for Males

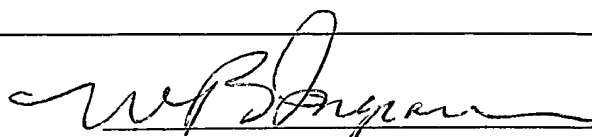
Height	Small Frame	Medium Frame	Large Frame
5' 4"	117 - 128	123 - 135	131 - 148
5' 5"	120 - 129	126 - 139	134 - 152
5' 6"	124 - 133	130 - 143	138 - 157
5' 7"	128 - 137	134 - 148	143 - 162
5' 8"	132 - 141	138 - 152	147 - 166
5' 9"	136 - 146	142 - 156	151 - 170
5' 10"	140 - 150	146 - 161	155 - 175
5' 11"	144 - 154	150 - 166	160 - 180
6'	148 - 158	154 - 171	164 - 185
6' 1"	152 - 163	158 - 176	169 - 190
6' 2"	156 - 167	163 - 181	174 - 195
6' 3"	160 - 171	168 - 186	178 - 200
6' 4"	169 - 180	178 - 196	188 - 210
6' 5"	174 - 185	182 - 202	192 - 216

3. Examinee's frame is ☐ small ☐ medium ☒ large

4. Considering above weight table, the examinee's frame, and other individual physical characteristics, I consider his present weight ☒ Satisfactory ☐ Excessive ☐ Deficient

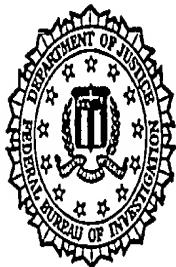
5. Under proper medical supervision, examinee should ☐ lose \_\_\_\_\_ pounds  
☐ gain \_\_\_\_\_ pounds

Remarks: \_\_\_\_\_

  
 (Signature of Medical Examiner)

5-4-62  
 (Date)

REC'D - ADM. DIV.  
FBI  
MAY 14 5 05 PM '62



UNITED STATES DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION

WASHINGTON 25, D. C.

In Reply, Please Refer to  
File No.

JUL 30 1962

Director  
Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C.

RE: SA Donald C. Morrell  
(Type or print plainly)

Dear Sir:

For inclusion in the fund to be paid to the designated beneficiary of any Special Agent of the FBI who has previously contributed to this fund and who dies from any cause except self-destruction while employed as a Special Agent, I am forwarding herewith (by CHECK - MONEY ORDER) the sum of \$10, payable to the Assistant Director, Administrative Division, FBI, to be included in said fund. Payment will be made for death by self-destruction after the Agent has been a member of the fund for a continuous period of two years. It is understood and agreed that the sum tendered herewith is a voluntary, gratuitous contribution to said fund which I understand is to be administered in the following manner.

The Director of the FBI will appoint a committee which shall consider all matters pertaining to the acquisition, safe keeping and expending of said fund, which committee will recommend appropriate action to the Director in pertinent matters. The Assistant Director of the Administrative Division of the FBI shall receive all contributions and account for same to the Director. Upon the death of any Special Agent who is a member of said fund the appointed committee will consider the case and submit a recommendation to the Director as to its conclusions. Appropriate instructions will then be issued to the Assistant Director of the Administrative Division, directing him to pay to the designated beneficiary the sum of \$10,000. The liability of the fund shall not under any circumstances exceed the amount of monies in the fund at the time any liability shall occur. The following person is designated as my beneficiary for FBI Agents' Insurance Fund:

Name Elizabeth H. Morrell	Relationship Wife	Date 7-10-62
Address 5516 Charlcote Road, Bethesda, Maryland		

The following person is designated as my beneficiary under the Chas. S. Ross Fund providing \$1500 death benefit to beneficiary of agents killed in the line of duty, other than travel accidents.

Name Elizabeth H. Morrell	Relationship Wife	Date 7-10-62
Address 5516 Charlcote Road, Bethesda, Maryland		

Very truly yours,

*Donald C. Morrell*  
Special Agent

3-*psd*

67-NOT RECORDED  
1 AUG 28 1962

RECEIPT FOR GOVERNMENT PROPERTY  
FEDERAL BUREAU OF INVESTIGATION  
UNITED STATES DEPARTMENT OF JUSTICE

4-27-62

I certify that I have received the following Government property for official use:

~~returned~~

Position Classification Manual #64 ✓

FILE

3-M

PER *PK*

READ

The Government property which you hereby acknowledge is charged to you and you are responsible for taking care of it and returning it when its use has been completed. DO NOT MARK OR WRITE ON IT OR MUTILATE IT IN ANY WAY.

67-NOT RECORDED

8 JUN 13 1962

Very truly yours,

(Written  
Signature)

*Donald C. Morrell*

(Typed  
Signature)

Donald C. Morrell

1/5



Name: DONALD C. MORRELL

Title: SPECIAL AGENT

EOD: 8-18-47

Grade: GS-15, \$14, 055

VETERAN

*2/5/5*

ASSISTANT DIRECTOR C. D. DE LOACH:

Mr. Morrell is the Section Chief of the Correspondence and Tours Section of the Crime Records Division and he assumed these duties on March 14, 1960. Mr. Morrell presents an excellent personal appearance. He is extremely conscientious and is amenable to discipline. Since he has assumed his new duties, he has performed his functions in an above-average manner and his leadership of this section has been outstanding. He is an extremely hard worker and has a great deal of tenacity. He has become a definite asset in his position as Section Chief. It should be pointed out that Mr. Morrell handles a tremendous volume of work and he does so in an expeditious manner. Since the last inspection, he has received three letters of commendation and five letters of censure.

Rating: Excellent

*JKD*  
INSPECTOR J. K. PONDER:  
(AJS:skm 5/29/62)

Inspector concurs with comments of Mr. DeLoach. The current inspection revealed that under Mr. Morrell's leadership the morale in the

Correspondence and Tours Section is excellent. The overcrowded conditions which prevailed during the last inspection have been corrected. This section handles a large volume of correspondence expeditiously and the employees work under extreme pressure. The employees operate as a team in getting their work accomplished, which speaks well for the leadership of Mr. Morrell. His weight is within desirable limits and he is interested in and completely available for administrative advancement. The Inspector feels he is capable of assuming additional responsibilities and rates his potential for advancement as excellent.

*JKD*  
**67-NOT RECORDED**  
**2 JUN 12 1962**

CRIME RECORDS DIVISION INSPECTION  
5-25-62  
CDD:geg

*2 JPD*  
*3-H*

UNITED STATES GOVERNMENT

*Memorandum*

Tolson \_\_\_\_\_  
 Belmont \_\_\_\_\_  
 Mohr \_\_\_\_\_  
 Callahan \_\_\_\_\_  
 Conrad \_\_\_\_\_  
 DeLoach \_\_\_\_\_  
 Evans \_\_\_\_\_  
 Malone \_\_\_\_\_  
 Rosen \_\_\_\_\_  
 Sullivan \_\_\_\_\_  
 Tavel \_\_\_\_\_  
 Trotter \_\_\_\_\_  
 Tele. Room \_\_\_\_\_  
 Holmes \_\_\_\_\_  
 Gandy \_\_\_\_\_

TO : Mr. DeLoach *D*

DATE: 9-6-62

FROM : D. C. Morrell *DCM/gem*SUBJECT: BUREAU WEIGHT PROGRAM  
PERSONNEL MATTER *WRB/ten/fay*

The below-named Supervisors in the Correspondence and Tours Section have been weighed by the Bureau Health Service and are all within the desirable weight range for their heights and frames:

[Redacted]  
 James C. Farrington  
 Jack E. Herington  
 Gordon E. Malmfeldt  
 Donald C. Morrell

[Redacted]  
 William H. Stapleton

[Redacted]  
 Robert M. Whomsley

b6  
 b7C

RECOMMENDATION:

For record purposes.

mlw  
 (2) *new*

*5* 44-931-118

41  
 98  
 XEROX  
 SEP 12 1962

*3*  
*WRB*

RECEIPT FOR GOVERNMENT PROPERTY  
FEDERAL BUREAU OF INVESTIGATION  
UNITED STATES DEPARTMENT OF JUSTICE

5-8-62

I certify that I have received the following Government property for official use:

~~returned~~

Key to Room 4724 ✓ ~~4729~~  
4718 ✓ ~~4716~~

FILE  
3-M

READ

The Government property which you hereby acknowledge is charged to you and you are responsible for taking care of it and returning it when its use has been completed. DO NOT MARK OR WRITE ON IT OR MUTILATE IT IN

ANY WAY. NOV 15 1962

Very truly yours, Don

(Written  
Signature)

Donald C. Morrell

(Typed  
Signature)

Donald C. Morrell

RECEIPT FOR GOVERNMENT PROPERTY  
FEDERAL BUREAU OF INVESTIGATION  
UNITED STATES DEPARTMENT OF JUSTICE

OCT 10 1962

May 8, 1962

I certify that I have received the following Government property for official use:

~~returned~~

Key to Room 4728 <sup>vid  
HLD</sup>

RETURNED

Key to Room 4724 <sup>vid  
HLD</sup>

FILE

3-M

READ

The Government property which you hereby acknowledge is charged to you and you are responsible for taking care of it and returning it when its use has been completed. DO NOT MARK OR WRITE ON IT OR MUTILATE IT IN ANY WAY.

Very truly yours,

PER \_\_\_\_\_

(Written  
Signature)

Donald C. Morrell

(Typed  
Signature)

Donald C. Morrell

2 NOV 15 1962

SE



UNITED STATES DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION

OCT 1 1962

In Reply, Please Refer to  
File No.

Director  
Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C.

RE: SA Donald C. Morrell  
(Type or print plainly)

Dear Sir:

For inclusion in the fund to be paid to the designated beneficiary of any Special Agent of the FBI who has previously contributed to this fund and who dies from any cause except self-destruction while employed as a Special Agent, I am forwarding herewith (by Check - Money Order) the sum of \$10, payable to the Assistant Director, Administrative Division, FBI, to be included in said fund. Payment will be made for death by self-destruction after the Agent has been a member of the fund for a continuous period of two years. It is understood and agreed that the sum tendered herewith is a voluntary, gratuitous contribution to said fund which I understand is to be administered in the following manner.

The Director of the FBI will appoint a committee which shall consider all matters pertaining to the acquisition, safe keeping and expending of said fund, which committee will recommend appropriate action to the Director in pertinent matters. The Assistant Director of the Administrative Division of the FBI shall receive all contributions and account for same to the Director. Upon the death of any Special Agent who is a member of said fund the appointed committee will consider the case and submit a recommendation to the Director as to its conclusions. Appropriate instructions will then be issued to the Assistant Director of the Administrative Division, directing him to pay to the designated beneficiary the sum of \$10,000. The liability of the fund shall not under any circumstances exceed the amount of monies in the fund at the time any liability shall occur. The following person is designated as my beneficiary for FBI Agents' Insurance Fund:

Name (primary beneficiary)	Relationship	Date
Elizabeth H. Morrell	Wife	9-11-62

Address  
5516 Charlcote Road, Bethesda, Maryland

Name (contingent beneficiary, if desired)	Relationship	Date
Estate		

Address

The following person is designated as my beneficiary under the Chas. S. Ross Fund providing \$1500 death benefit to beneficiary of agents killed in the line of duty, other than travel accidents.

Name (primary beneficiary)	Relationship	Date
Elizabeth H. Morrell	Wife	9-11-62

Address  
5516 Charlcote Road, Bethesda, Maryland

Name (contingent beneficiary, if desired)	Relationship	Date
Estate		

Address

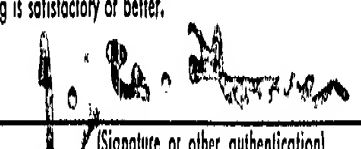
Very truly yours,

*Donald C. Morrell*  
Special Agent

3- morrell

67-NOT RECORDED

7 OCT 23 1962

1. Agency and organizational designations <b>FBI</b>						2. Payroll period		3. Block No.		4. Slip No.		
5. Employee's name (and social security account number when appropriate) <b>#08082 MR. DONALD C. MORRELL</b>						6. Grade and salary <b>Supv. SA GS 15 Step 3 \$15,525</b>						
<b>PAYROLL CHANGE DATA</b>												
	BASE PAY	OVERTIME		GROSS PAY	RET.	FEDERAL TAX	BOND	F. I. C. A.	STATE TAX	GROUP LIFE INS.	HEALTH BENEFITS	NET PAY
7. Previous normal												
8. New normal												
9. Pay this period												
10. Remarks: <b>Work is of an acceptable level of competence.</b>								11. Appropriation(s)		12. Prepared by		
										13. Audited by		
<input checked="" type="checkbox"/> Periodic step-increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step-increase _____												
14. Effective date	15. Date last equivalent increase	16. Old salary rate	17. New salary rate	18. Performance rating is satisfactory or better.								
<b>12-9-62</b>	<b>12-10-61</b>	<b>\$15,045</b>	<b>\$15,525</b>	 _____ (Signature or other authentication)								
19. LWOP data (Fill in appropriate spaces covering LWOP during following period(s). Period(s):				(Check applicable box in case of excess LWOP) <input type="checkbox"/> In pay status at end of waiting period <input type="checkbox"/> In LWOP status at end of waiting period.								
<input checked="" type="checkbox"/> No excess LWOP. Total excess LWOP: _____				<b>mbh</b> Initials of Clerk								

(Field Office or Division)

Crime Records

(Date)

11/27/62

Director  
Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C.

Dear Sir:

In continuing my employment in the Federal Bureau of Investigation, United States Department of Justice, I hereby agree that I will be governed by the following provisions.

1. That the strictly confidential character of any and all information secured by me or coming to my attention in connection, directly or indirectly, with my work as an employee of this Bureau, or the work of other employees of which I may become cognizant, is fully understood by me; and that neither during my tenure of service with the Federal Bureau of Investigation, nor at any time, will I violate this confidence nor will I divulge any information of any kind or character whatsoever that may become known to me to persons not officially entitled thereto, recognizing applicability to me of penalty provisions in case of any violation by me.
2. That information referred to in Item 1 above includes but is by no means limited to information in the interests of the defense of the United States marked "Top Secret," "Secret," or "Confidential," and that Department of Justice regulations provide specifically for penalty applicable to me for any violation of Executive Order 10501, the basic authority for safeguarding such information, as follows: "Any officer or employee who violates any provision of Executive Order No. 10501, as amended, or of these regulations shall be subject to appropriate disciplinary action. Prompt and stringent administrative action shall be taken against any officer or employee determined to have been knowingly responsible for any release or disclosure of classified defense information or material except in the manner authorized by these regulations. Whenever a violation of criminal statutes may be involved in a deliberate unauthorized release or disclosure of classified defense information, criminal prosecution, in an appropriate case, shall also be instituted."

I further certify that the conditions specified herein are agreeable to me, and that I continue as an employee of the Federal Bureau of Investigation with a full knowledge of the conditions above set forth.

Very truly yours,

Donald C. Marshall  
(Signature and Title of Position)  
Special Agent

42

DEC 10 1962

3/1/63

UNITED STATES GOVERNMENT

## Memorandum

TO : Mr. DeLoach

DATE: 1-17-63

FROM : D. C. Morrell

SUBJECT: SA DONALD C. MORRELL  
Correspondence and Tours Section  
Crime Records Division  
ERRORS IN CORRESPONDENCE

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Evans \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

On January 14, 1963, I was charged with my tenth reviewing error in the current error period. In accordance with existing regulations, I should receive a letter of censure for my failure to detect errors in correspondence reviewed and approved by me.

RECOMMENDATION:

Accordingly, it is recommended I be censured for failure to detect errors in correspondence I reviewed and approved for the Section.

1 - Mr. Cavanaugh

DCM:mlw  
(4)

REG-130

67-421 042-152

Searched \_\_\_\_\_ Numbered \_\_\_\_\_

10 JAN 22 1963

Letter of Censure  
1-21-63  
HNB:KAR

3/1/63



January 21, 1963

PERSONAL

Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

JAN 21 10 07 PM '63  
REC'D READING ROOM  
F B I

Dear Mr. Morrell:

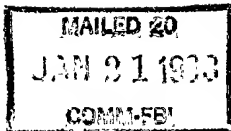
It is noted that on several occasions errors were detected in correspondence which you approved, and greater care on your part in handling this phase of your supervisory duties could have prevented these mistakes.

Hereafter, in your review and approval of correspondence, you will be expected to demonstrate greater thoroughness so that it will not be necessary to again bring a similar matter to your attention.

Very truly yours,

J. Edgar Hoover

John Edgar Hoover  
Director



1 - Mr. DeLoach (Personal Attention)

1 - Crime Records Division Personnel File

HNB:kar

(5)

Based on memo, D. C. Morrell to Mr. DeLoach, 1-17-63, DCM:mlw

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Evans \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

MAIL ROOM ☐ TELETYPE UNIT ☐

UNITED STATES GOVERNMENT

## Memorandum

TO : Mr. DeLoach

DATE: 2-11-63

FROM : D. C. Morrell

SUBJECT: CORRESPONDENCE MATTERS

Tolson \_\_\_\_\_  
 Belmont \_\_\_\_\_  
 Mohr \_\_\_\_\_  
 Casper \_\_\_\_\_  
 Callahan \_\_\_\_\_  
 Conrad \_\_\_\_\_  
 DeLoach \_\_\_\_\_  
 Evans \_\_\_\_\_  
 Gale \_\_\_\_\_  
 Rosen \_\_\_\_\_  
 Sullivan \_\_\_\_\_  
 Tavel \_\_\_\_\_  
 Trotter \_\_\_\_\_  
 Tele. Room \_\_\_\_\_  
 Holmes \_\_\_\_\_  
 Gandy \_\_\_\_\_

On my memorandum to you of 2-8-63 captioned "Correspondence With Honorable Henry R. Luce," Mr. Tolson inquired, "What do the Agent Supervisors handle?"

Agent Supervisors in the Correspondence and Tours Section dictate and handle all of the involved, intricate letters to important personages, such as Cabinet members, Senators, Members of Congress and individuals on the Special Correspondents' List. A very general rule of thumb is that Special Agents handle the mail which is routed to this Section from the Director's Office, Mr. Tolson's office or other highly placed Bureau officials. Also, any other mail requiring an Agent's background and experience is handled by Special Agent personnel. Although Mr. Luce is not on the Special Correspondents' List, he is an important personage and his letter should have been handled by a Special Agent. \*

In the Executives Conference this morning, Mr. Tolson also inquired as to whether clerks dictate to other clerical employees. In answer to this inquiry, it is necessary that the administrative set-up of our Section be explained. The Section is broken down into three units, the Special Correspondence Unit, the Non-Special Correspondence Unit and the Tour Unit. Only Agent personnel are assigned to the Special Correspondence Unit. The Non-Special Correspondence Unit personnel consists of a Special Agent Unit Chief, one Special Agent dictator and five clerical dictators, the latter ranging in Grade GS-5 to Grade GS-9. These clerical dictators do dictate to our Grade GS-4 Stenographers. All Stenographers, not including Secretaries, are Grade GS-4 in this Section, though efforts have been made to secure higher grade stenographic personnel for this important work. The Non-Special Correspondence Unit handles the less involved mail, requests for Bureau reprints and publications, routine requests for tours of the FBI, letters from citizens which do not relate to our jurisdiction but are of interest to other governmental agencies and other inquiries from the public of a general nature.

RECOMMENDATION:

For information.

MAR 11 3 55 PM '63

GEM:mlw (3)

58 pmx

1 MAR 8 1963 MAR 7 1963

31

\* SEE ADDENDUM NEXT PAGE...

memo to Mr. Tolson  
 12/18/63  
 Delaney

Morrell to DeLoach memo

ADDENDUM: 2-11-63, REW/sak:

All important mail of the type described above is received in the Front Office of the Section Chief and is thereafter taken to the Special Correspondence Unit for appropriate action and assignment. The letter from Mr. Luce was handled in this manner and was assigned to Clerical Dictator [redacted] by SA [redacted] Chief of the Special Correspondence Unit.

b6  
b7C

I have asked  
Mr. Gale to  
look into  
the handling  
of correspondence

T. J. L.

John P. Mohr  
CARTER D. DE LOACH  
HAROLD P. LEINBAUGH  
DONALD C. MORRELL  
Morse, [unclear], [unclear],  
[unclear], [unclear],  
[unclear], 2/13/63  
[unclear]

D  
Suggested he be  
assigned,  
yes  
yes  
yes

what about the  
other persons  
who reviewed  
and initialed  
the letter?

yes  
T. J. L.  
yes

UNITED STATES GOVERNMENT

## Memorandum

TO : Mr. DeLoach

DATE: 2-8-63

FROM : D. C. Morrell *DCM*SUBJECT: CORRESPONDENCE WITH  
HONORABLE HENRY R. LUCE

Tolson \_\_\_\_\_  
 Belmont \_\_\_\_\_  
 Mohr \_\_\_\_\_  
 Casper \_\_\_\_\_  
 Callahan \_\_\_\_\_  
 Conrad \_\_\_\_\_  
 DeLoach \_\_\_\_\_  
 Evans \_\_\_\_\_  
 Gale \_\_\_\_\_  
 Rosen \_\_\_\_\_  
 Sullivan \_\_\_\_\_  
 Tavel \_\_\_\_\_  
 Trotter \_\_\_\_\_  
 Tele. Room \_\_\_\_\_  
 Holmes \_\_\_\_\_  
 Gandy \_\_\_\_\_

b6  
b7C

*CRIME RE-INSPECTION*

Mr. Tolson has asked for the comments of the dictator as to why, in preparing a proposed declination to attend the 40th Anniversary celebration of Time in New York, the sentence "I am sorry I cannot be of assistance but trust you will understand the difficulties involved" was used.

The proposed reply was prepared by Correspondence Clerk [redacted] who has furnished the following comments.

*what do they expect supervisors to do?*

Mr. Luce's letter of 2-2-63 pointed out that "among the guests, distinguished by their achievement in many fields of endeavor, will be several hundred individuals who, like yourself, have appeared on the cover of Time." He said that he hoped President Kennedy and other eminent men and women who have made history would be present, pointing out that the "essential concept of the birthday party is to recall this history in terms of the history-makers." He said that "your presence would greatly add to its significance."

*67-7-400-M-49*

Normally, we would not use the sentence referred to in a letter declining an invitation where the Director is not to be a speaker but [redacted] felt it was appropriate in this instance because Mr. Luce was seeking the co-operation or assistance of the specific individuals whose portraits had appeared on the front cover of the magazine in making this celebration a success by their presence.

RECOMMENDATION:

For information.

DCM:mlw  
(3)

*Memorandum  
 2/11/63  
 DCM:mlw*

*I have spoken  
 to Morrell about  
 this and that book  
 letters should be handled  
 by a Special Agent*

*Just who  
 approach  
 the latter?*

D. C. Morrell  
 H. P. Lenbaugh  
 C. D. DeLoach  
 J. P. Mohr

MAR 8 1963

31

UNITED STATES GOVERNMENT

## Memorandum

6X

Tolson \_\_\_\_\_  
 Belmont \_\_\_\_\_  
 Mohr \_\_\_\_\_  
 Casper \_\_\_\_\_  
 Callahan \_\_\_\_\_  
 Conrad \_\_\_\_\_  
 DeLoach \_\_\_\_\_  
 Evans \_\_\_\_\_  
 Gale \_\_\_\_\_  
 Rosen \_\_\_\_\_  
 Sullivan \_\_\_\_\_  
 Tavel \_\_\_\_\_  
 Trotter \_\_\_\_\_  
 Tele. Room \_\_\_\_\_  
 Holmes \_\_\_\_\_  
 Gandy \_\_\_\_\_

TO : Mr. DeLoach

DATE: 2-1-63

FROM : D. C. Morrell *DCM*SUBJECT: BUREAU WEIGHT PROGRAM  
PERSONNEL MATTER

*W. H. Stapleton*  
*PHYSICAL EXAMS*

The below-named Supervisors in the Correspondence and Tours Section have been weighed by the Bureau Health Service and are all within the desirable weight range for their heights and frames:

[Redacted]

b6  
b7C

James C. ~~X~~Farrington  
 Jack E. ~~X~~Herrington  
 Gordon E. ~~X~~Malmfeldt  
 Donald C. ~~X~~Morrell  
 Donald T. ~~X~~Perrine

[Redacted]

William H. ~~X~~Stapleton

[Redacted]

Robert M. ~~X~~WhomsleyRECOMMENDATION:

For record purposes.

mlw  
 (2) *W. H. Stapleton*

*D 2/1*

100-130

51-09-4442  
 Searched \_\_\_\_\_  
 FEB 1 1963

137

7 FEB 6 1963

109 *mlw*  
FEB 5 1963

3  
*W. H. Stapleton*

February 13, 1963

PERSONAL

FEB 13 9 57 AM '63  
REC'D-READING ROOM  
FBI

Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Morrell:

An outgoing letter dated February 7, 1963, to Mr. Henry R. Luce of New York City, contained language which was obviously unsuitable under the existing circumstances. This item of correspondence was prepared under your over-all supervision and it is noted that you personally approved it.

Your failure to detect the inadequacy of this letter indicates a lack of sufficient care on your part in this instance. You should make certain that delinquencies of this nature are avoided in the future.

Very truly yours,

J. Edgar Hoover

John Edgar Hoover  
Director

1-Mr. DeLoach (Personal Attention)

1-Crime Records Division Personnel File

JIC:cob

(5)

Based on memos D. C. Morrell to Mr. DeLoach 2/8/63, DCM:mlw, and 2/11/63, GEM:mlw

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Evans \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

MAIL ROOM ☐ TELETYPE UNIT ☐



UNITED STATES DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION

In Reply, Please Refer to  
File No.

Director  
Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C.

Dear Sir:

For inclusion in the fund to be paid to the designated beneficiary of any Special Agent of the FBI who has previously contributed to this fund and who dies from any cause except self-destruction while employed as a Special Agent, I am forwarding herewith (by Check - Money Order) the sum of \$10, payable to the Assistant Director, Administrative Division, FBI, to be included in said fund. Payment will be made for death by self-destruction after the Agent has been a member of the fund for a continuous period of two years. It is understood and agreed that the sum tendered herewith is a voluntary, gratuitous contribution to said fund which I understand is to be administered in the following manner.

The Director of the FBI will appoint a committee which shall consider all matters pertaining to the acquisition, safe keeping and expending of said fund, which committee will recommend appropriate action to the Director in pertinent matters. The Assistant Director of the Administrative Division of the FBI shall receive all contributions and account for same to the Director. Upon the death of any Special Agent who is a member of said fund the appointed committee will consider the case and submit a recommendation to the Director as to its conclusions. Appropriate instructions will then be issued to the Assistant Director of the Administrative Division, directing him to pay to the designated beneficiary the sum of \$10,000. The liability of the fund shall not under any circumstances exceed the amount of monies in the fund at the time any liability shall occur.

**EXECUTE IN DUPLICATE AND SUBMIT BOTH COPIES TO THE BUREAU**

Official Bureau Name (please type or print)	Date	Office of Assignment (or SOG Division)
SA Donald C. Morrell	3-8-63	Crime Records Division

The following person is designated as my beneficiary for Special Agents Insurance Fund:

Name (primary beneficiary; use given first name if female)	Relationship
Elizabeth Hammer Morrell	Wife

Address
5516 Charlcote Road, Bethesda 14, Maryland

Name (contingent beneficiary, if desired; use given first name if female)	Relationship
Estate	

Address
---------

The following person is designated as my beneficiary under the Chas. S. Ross Fund providing \$1500 death benefit to beneficiary of agents killed in the line of duty, other than travel accidents.

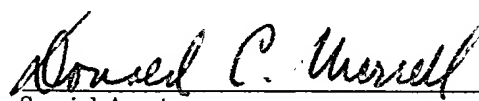
Name (primary beneficiary; use given first name if female)	Relationship
Elizabeth Hammer Morrell	Wife

Address
5516 Charlcote Road, Bethesda 14, Maryland

Name (contingent beneficiary, if desired; use given first name if female)	Relationship
Estate	

Address
---------

Very truly yours,

  
 Special Agent

67 (67)

**FEDERAL BUREAU OF INVESTIGATION  
UNITED STATES DEPARTMENT OF JUSTICE**

REPORT OF PERFORMANCE RATING

*per [unclear] with [unclear]  
Lyn [unclear] Beardslee*

Name of Employee: DONALD C. MORRELL

Where Assigned: Crime Records Division Correspondence and Tours Section  
(Division) (Section, Unit)

Official Position Title: Special Agent - Chief, Correspondence and Tours Section

Rating Period: from 4/1/62 to 3/31/63

ADJECTIVE RATING: EXCELLENT  
Outstanding, Excellent, Satisfactory, Unsatisfactory

Employee's  
Initials

*DCM*

Rated by: C. D. DeLoach Assistant Director 4/1/63  
Signature Title Date

Reviewed by: \_\_\_\_\_  
Signature Title Date

Rating Approved by: [Signature] Assistant Director APR 29 1963  
Signature Title Date

TYPE OF REPORT

- (X) Official  
(X) Annual

- ( ) Administrative  
( ) Searched  
( ) 60-Day  
( ) 90-Day  
( ) Transfer  
( ) Separation from Service  
( ) Special

REC-145

67-22112-154  
APR 11 1963  
[initials]

1 MAY 1 1963



NARRATIVE COMMENTS

Note: The regulations require that OUTSTANDING ratings be supported by a statement in writing setting forth IN DETAIL the performance IN EVERY ASPECT and the REASONS for considering each worthy of SPECIAL COMMENDATION. UNSATISFACTORY ratings must be supported by a statement in writing stating (1) WHEREIN the performance is unsatisfactory, (2) the facts of the (90 day) PRIOR WARNING, and (3) the efforts made AFTER THE WARNING TO HELP the employee bring his performance up to a satisfactory level.

# PERFORMANCE RATING GUIDE FOR INVESTIGATIVE PERSONNEL

(For use as attachment to Performance Rating Form No. FD-185)

Name of Employee Donald C. Morrell Title Special AgentRating Period: from 4/1/62 to 3/31/63

## RATING GUIDE AND CHECK-LIST

Note: Only those items having pertinent bearing on employee's performance should be rated. All employees in same salary grade should be compared. Rate items as follows:

- + Outstanding (exceeding excellent and deserving of special commendation).  
E Excellent.  
✓ Satisfactory (good or very good).  
- Unsatisfactory.  
O No opportunity to appraise performance during rating period.

Guide for determining adjective rating:

- "Outstanding" adjective rating requires (A) that all rated elements be "+" and (B) that each and every rated element be factually justified by narrative detail on reverse of Form FD-185.
- "Excellent," "Satisfactory" or "Unsatisfactory" adjective ratings will depend upon the composite result of evaluating all rated elements rather than following any mechanical formulas; however, for an employee to be rated "Excellent" he must not be rated unsatisfactory on any performance evaluation factors on the rating guide and check-list and must be rated "Excellent" or "Outstanding" on the majority of such rating factors. Good judgment must be exercised to insure that adjective rating is reasonable in the light of elements rated.
  - Any element rated "Unsatisfactory" must be supported by narrative comments.
  - An "official" adjective rating of "Unsatisfactory" must comply with the requirements described on the reverse of form FD-185.

- |   |   |
|---|---|
| <u>+</u> (1) Personal appearance.   | <u>E</u> (17) Firearms ability.   |
| <u>+</u> (2) Personality and effectiveness of his personal contacts.  | <u>O</u> (18) Development of informants and sources of information.   |
| <u>+</u> (3) Attitude (including dependability, cooperativeness, loyalty, enthusiasm, amenability and willingness to equitably share work load).  | <u>+</u> (19) Reporting ability: <ul style="list-style-type: none"> <li><u>-</u> (a) Investigative reports</li> <li><u>+</u> (b) Summary reports</li> <li><u>+</u> (c) Memos, letters, wires</li> </ul> (Consider: <u>E</u> conciseness; <u>+</u> clarity; <u>+</u> organization; <u>+</u> thoroughness; <u>+</u> accuracy; <u>+</u> adequacy and pertinency of leads; <u>+</u> administrative detail.)   |
| <u>+</u> (4) Physical fitness (including health, energy, stamina).  | <u>O</u> (20) Performance as a witness.   |
| <u>+</u> (5) Resourcefulness and ingenuity.   | <u>+</u> (21) Executive ability: <ul style="list-style-type: none"> <li><u>+</u> (a) Leadership</li> <li><u>+</u> (b) Ability to handle personnel</li> <li><u>+</u> (c) Planning</li> <li><u>+</u> (d) Making decisions</li> <li><u>+</u> (e) Assignment of work</li> <li><u>+</u> (f) Training subordinates</li> <li><u>+</u> (g) Devising procedures</li> <li><u>+</u> (h) Emotional stability</li> <li><u>+</u> (i) Promoting high morale</li> <li><u>+</u> (j) Getting results</li> </ul> |
| <u>+</u> (6) Forcefulness and aggressiveness as required.   | <u>O</u> (22) Ability on raids and dangerous assignments: <ul style="list-style-type: none"> <li><u>-</u> (a) As leader</li> <li><u>-</u> (b) As participant</li> </ul>   |
| <u>+</u> (7) Judgment, including common sense, ability to arrive at proper conclusions, ability to define objectives.   | <u>+</u> (23) Organizational interest, such as making of suggestions for improvement.   |
| <u>+</u> (8) Initiative and the taking of appropriate action on own responsibility.   | <u>+</u> (24) Ability to work under pressure.   |
| <u>+</u> (9) Planning ability and its application to the work.  | <u>+</u> (25) Miscellaneous. Specify and rate: <ul style="list-style-type: none"> <li><u>+</u> Dictation ability</li> </ul>   |
| <u>+</u> (10) Accuracy and attention to pertinent detail.   |   |
| <u>+</u> (11) Industry, including energetic, consistent application to duties.  |   |
| <u>E</u> (12) Productivity, including amount of acceptable work produced and rate of progress on or completion of assignments. Also consider adherence to deadlines unless failure to meet is attributable to causes beyond employee's control.   |   |
| <u>+</u> (13) Knowledge of duties, instructions, rules and regulations, including readiness of comprehension and "know how" of application.   |   |
| <u>O</u> (14) Technical or mechanical skills.   |   |
| <u>O</u> (15) Investigative ability and results: <ul style="list-style-type: none"> <li><u>-</u> (a) Internal security cases</li> <li><u>-</u> (b) Criminal or general investigative cases</li> <li><u>-</u> (c) Fugitive cases</li> <li><u>-</u> (d) Applicant cases</li> <li><u>-</u> (e) Accounting cases</li> </ul> |   |
| <u>O</u> (16) Physical surveillance ability.  |   |

A. Specify general nature of assignment during most of rating period (such as security, criminal, applicant squad, or as Resident Agent, supervisor, instructor, etc.): Section Chief - Correspondence and Tours SectionB. Specify employee's most noteworthy special talents (such as investigator, desk man, research, instructor, speaker): desk man- lecturer

- C. (1) Is employee available for general assignment wherever needs of service require? yes (If answer is not "yes," explain in narrative comments.)  
 (2) Is employee available for special assignment wherever needs of service require? yes (If answer is not "yes," explain in narrative comments.)

D. 1. Has employee had an abnormal sick leave record during rating period? no 2. Has employee used more sick leave (including annual leave or LWOP for illness) during rating period than the amount of sick leave earned during such period? no (If answer to either question is "Yes," explain in narrative comments.)

E. Is employee qualified to operate a motor vehicle incidental to his official duties? ☒ Yes ☐ No  
 If answer is "yes," personnel file must reflect the following: (a) Has valid State or local operator's license for type vehicle he is to use. (b) Is physically fit to drive. (c) Past safe driving record OK or has passed Bureau road test.

ADJECTIVE RATING: EXCELLENT  
Outstanding, Excellent, Satisfactory, Unsatisfactory

EMPLOYEE'S INITIALS

DCM

April 9, 1963

DONALD C. MORRELL

Special Agent - Section Chief  
Correspondence and Tours Section  
Crime Records Division

Section Chief Morrell makes an outstanding appearance. He is neat, conservatively dressed and makes a good impression upon the general public and the employees working under him. I particularly appreciate his initiative, loyalty and his amenability to discipline. It is seldom necessary to repeat instructions given to Section Chief Morrell inasmuch as he is fast, alert and handles himself very intelligently. He has done well in his section in streamlining, bringing forth new ideas and inspiring his personnel. He has taken 30 hours of sick leave since the last rating period.

This Section Chief is ideally suited for his current position in view of his background in administrative matters.

During this rating period, Mr. Morrell has been censured on two occasions. This is not unusual in view of the fact he reads a tremendous volume of mail and prepares some dictation. Both censures were a result of errors in outgoing signature mail.

Section Chief Morrell contributes a considerable amount of voluntary overtime in a completely unselfish manner. He demands and receives both respect and good discipline from his subordinates. His memoranda are analytical and objective in scope.

This man has progressed considerably as a Section Chief and his interest and enthusiasm continue at a rapid rate.

In addition to his heavy responsibilities as Section Chief of the Correspondence and Tours Section, Mr. Morrell plays a very important role in the activities of the Special Agents Mutual Benefits Association. He is responsible for many steps forward which have been taken to benefit FBI employees under this program.

I consider this Section Chief to be rated "Excellent" and that he well deserves this rating.

DCM

## PART II SPECIFIC COMMENTS

### 1. Justification for Any Minus Ratings Given

N. A.

### 2. Experience and Ability as Inspector's Aide

Mr. Morrell is a qualified Inspector's Aide but was not given any inspection assignments during the rating period because of the absolute necessity to keep him at his desk.

### 3. Participation in Informant Programs

N. A.

### 4. Testifying Experience and Ability

Section Chief Morrell has had no opportunity to testify during the rating period, but he has had the opportunity to testify in the past and performed in an above-average manner.

### 5. Disciplinary Action

As reflected in Part I, this Section Chief received two letters of censure during the rating period.

### 6. Accounting Information

N. A.

### 7. Police Instruction

N. A. However, this Agent has a definite asset as a lecturer and can be used in this category at any time.

### 8. Sound Training

N. A.

### 9. Resident Agents

N. A.

### 10. Foreign Language Ability

N. A.

SCM

11. Administrative Advancement

Is Agent (a) interested in (Yes X No \_\_\_\_), (b) completely available for (Yes X No \_\_\_\_), and (c) considered completely qualified at present for administrative advancement including experience, ability, personality, and appearance? (Yes X No \_\_\_\_). (d) If answer to (c) is "Yes," would you consider his qualifications very good \_\_\_\_, excellent X, outstanding \_\_\_\_.

(e) If answer to (c) is "No," does he have potential for future administrative advancement? (Yes \_\_\_\_ No \_\_\_\_).

gcm

Name: DONALD C. MORRELL

Title: SPECIAL AGENT

EOD: 8-18-47

Grade: GS-15 \$15,525

VETERAN

NOT ON PROBATION

ASSISTANT DIRECTOR C. D. DE LOACH:

Mr. Morrell is the Section Chief of the Correspondence and Tours Section. He presents an excellent personal appearance, is extremely conscientious, and is amenable to discipline. This Section Chief has performed his functions in an above-average manner since assuming these duties on March 14, 1960. The Agents under his supervision respect him highly. His leadership has been far above average. I like this man's tenacity and loyalty. He is a definite asset to the Bureau. Since the last inspection, Mr. Morrell has been censured on two occasions, both concerned the review of signature mail. This is not unusual in view of the fact he reads a tremendous volume of mail and prepares some dictation. Mr. Morrell makes an outstanding contribution to this Division in his capacity as Section Chief. Despite his heavy responsibilities, he still finds time to contribute considerable work to the Special Agents Mutual Benefit program.

Rating: Excellent

CRIME RECORDS DIVISION INSPECTION

4-18-63

CDD:geg

Name: DONALD C. MORRELL

Title: SPECIAL AGENT

EOD: 8-18-47

Grade: GS-15 \$15,525

VETERAN

NOT ON PROBATION

*D4/18*  
ASSISTANT DIRECTOR C. D. DE LOACH:

Mr. Morrell is the Section Chief of the Correspondence and Tours Section. He presents an excellent personal appearance, is extremely conscientious, and is amenable to discipline. This Section Chief has performed his functions in an above-average manner since assuming these duties on March 14, 1960. The Agents under his supervision respect him highly. His leadership has been far above average. I like this man's tenacity and loyalty. He is a definite asset to the Bureau. Since the last inspection, Mr. Morrell has been censured on two occasions, both concerned the review of signature mail. This is not unusual in view of the fact he reads a tremendous volume of mail and prepares some dictation. Mr. Morrell makes an outstanding contribution to this Division in his capacity as Section Chief. Despite his heavy responsibilities, he still finds time to contribute considerable work to the Special Agents Mutual Benefit program.

Rating: Excellent

*JPS*  
ASSISTANT DIRECTOR J. H. GALE:  
(J. H. Gale:wmj 4/25/63)

I generally agree with the comments of Mr. DeLoach. An average of 242 pieces of outgoing mail per day has been

handled by the Correspondence Unit. However, I stressed to Mr. Morrell the need for assuring that correspondence is handled in accordance with Bureau policy. He was also advised that returns from reviewers at the executive level must be kept to an absolute minimum. The implementation of the recommendations made by Inspector during a special survey in February, 1963, has resulted in more effective supervision in the Correspondence Units of the Correspondence and Tours Section. Mr. Morrell has an intense interest in his work, is enthusiastic, and is making every effort to operate the Correspondence and Tours Section with the utmost efficiency.

CRIME RECORDS DIVISION INSPECTION

4-18-63

CDD:geg

67-NOT RECORDED  
10 APR 29 1963

*JPS*  
10  
3-4-63

62

UNITED STATES GOVERNMENT

## Memorandum

TO : MR. CALLAHAN

DATE: April 29, 1963

FROM : C. R. DAVIDSON *CRD*

SUBJECT: SA DONALD C. MORRELL  
 Section Chief  
 Correspondence and Tours Section  
 Crime Records Division  
 Veteran; Not On Probation  
 EOD 8-18-47 Special Agent; GS-15, \$15,525  
 PHYSICAL MATTER

Tolson \_\_\_\_\_  
 Belmont \_\_\_\_\_  
 Mohr \_\_\_\_\_  
 Casper \_\_\_\_\_  
 Callahan \_\_\_\_\_  
 Conrad \_\_\_\_\_  
 DeLoach \_\_\_\_\_  
 Evans \_\_\_\_\_  
 Gale \_\_\_\_\_  
 Rosen \_\_\_\_\_  
 Sullivan \_\_\_\_\_  
 Tavel \_\_\_\_\_  
 Trotter \_\_\_\_\_  
 Tele. Room \_\_\_\_\_  
 Holmes \_\_\_\_\_  
 Gandy \_\_\_\_\_

Purpose: To advise you of the doctor's findings and recommendations concerning SA Morrell's chronic sinus drainage problem.

SA Morrell was afforded his annual physical examination at the U.S. Naval Hospital, Bethesda, Maryland, on 4-16-63 at which time Dr. L. P. Kirkpatrick, the examining physician, referred him to the Ear, Nose and Throat Clinic for evaluation of agent's chronic sinus drainage problem.

Dr. W. G. Monell, of referenced clinic, saw Morrell that afternoon. Upon completion of his examination he advised SA Morrell has a marked deflected nasal septum with a spur on the right side. He advised he would like to have SA Morrell admitted to referenced hospital on 5-15-63 for corrective surgery.

In accordance with instructions received from Rear Admiral E. C. Kenney, Surgeon General, U.S. Navy, Captain J. G. Kurfees, Professional Assistant to the Commanding Officer, on 4-24-63 was advised of Dr. Monell's findings and decision. He authorized admission for SA Morrell on 5-15-63 for corrective surgery.

RECOMMENDATION:

That Bureau approval be granted for admission to U.S. Naval Hospital, Bethesda, Maryland, of SA Morrell on 5-15-63 for corrective surgery.

WBH:RHD/skd

1 - Mr. DeLoach

1 -

1 -

1 -

1 -

(7)

RECORDED 15

67-421 042-155	
Searched _____	Numbered 75
MAY 6 1963	

SA Morrell was notified re approval on 5-1-63. 1245

b6

b7C

3  
m

RM  
 5-2-63  
 will forward 4/30  
 fuc

63  
 7/10/63  
 5/2

67564  
 137



REPORT OF MEDICAL EXAMINATION

FBI-105

1. LAST NAME—FIRST NAME—MIDDLE NAME <b>MORRELL, DONALD C</b>		2. GRADE AND COMPONENT OR POSITION <b>FBI</b>	3. IDENTIFICATION NO.
4. HOME ADDRESS (Number, street or RFD, city or town, zone and State)		5. PURPOSE OF EXAMINATION <b>ANNUAL PHYSICAL</b>	6. DATE OF EXAMINATION <b>4-16-63</b>
7. SEX <b>M</b>	8. RACE <b>W</b>	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY _____ CIVILIAN _____	
10. DATE OF BIRTH <b>JUNE 13, 1918</b>		11. PLACE OF BIRTH <b>BROOKLYN, NEW YORK</b>	
12. EXAMINING FACILITY OR EXAMINER, AND ADDRESS <b>N N M C</b>		13. OTHER INFORMATION	
14. RATING OR SPECIALTY		15. TIME IN THIS CAPACITY (Total) _____ LAST SIX MONTHS _____	

CLINICAL EVALUATION	
NOR- MAL	ABNOR- MAL
18. HEAD, FACE, NECK, AND SCALP	
19. NOSE	
20. SINUSES	
21. MOUTH AND THROAT	
22. EARS—GENERAL (Int. & ext. canals) (Auditory acuity under items 70 and 71)	
23. DRUMS (Perforation)	
24. EYES—GENERAL (Visual acuity and refraction under items 68, 69 and 67)	
25. OPHTHALMOSCOPIC	
26. PUPILS (Equality and reaction)	
27. OCULAR MOTILITY (Associated parallel movements, nystagmus)	
28. LUNGS AND CHEST (Include breasts)	
29. HEART (Thrust, size, rhythm, sounds)	
30. VASCULAR SYSTEM (Varicosities, etc.)	
31. ABDOMEN AND VISCERA (Include hernia)	
32. ANUS AND RECTUM (Hemorrhoids, fistulae) (Prostate, if indicated)	
33. ENDOCRINE SYSTEM	
34. G-U SYSTEM	
35. UPPER EXTREMITIES (Strength, range of motion)	
36. FEET	
37. LOWER EXTREMITIES (Except feet) (Strength, range of motion)	
38. SPINE, OTHER MUSCULOSKELETAL	
39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
40. SKIN, LYMPHATICS	
41. NEUROLOGIC (Equilibrium tests under item 72)	
42. PSYCHIATRIC (Specify any personality deviation)	
43. PELVIC (Females only) (Check how done) <input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES. (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

Prostate normal size & consistency

ENCLOSURE

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)		REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES	
O—Restorable teeth I—Nonrestorable teeth X—Missing teeth XXX—Replaced by dentures (6 X 8)—Fixed bridge, brackets to include abutments		45. 4-16-63 No defects noted	
R I G H T	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32		

45. URINALYSIS: A. SPECIFIC GRAVITY <b>1.020</b>		46. CHEST X-RAY (Place, date, film number and result) <b>10437-63 chest is radiographically normal.</b>	
B. ALBUMIN <b>Neg.</b>		47. SEROLOGY (Specify test used and result) <b>Neg.</b>	
C. SUGAR <b>Neg.</b>		48. EKG <b>Sinus bradycardia</b>	
49. BLOOD TYPE AND RH FACTOR		50. OTHER TESTS <b>nose &amp; throat — see consultant</b>	

13 MAY 14 1963

Jan

# MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT <u>67</u>		52. WEIGHT <u>157</u>		53. COLOR HAIR <u>Br.</u>		54. COLOR EYES <u>Blue</u>		55. BUILD: <input type="checkbox"/> SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE				56. TEMPERATURE <u>97.8</u>																												
57. BLOOD PRESSURE (Arm at heart level)								58. PULSE (Arm at heart level)																																
A. SITTING SYS. <u>120</u> DIAS. <u>62</u>		B. RECUMBENT SYS. DIAS. 		C. STANDING (3 min.) SYS. DIAS. 		A. SITTING <u>66</u>		B. AFTER EXERCISE		C. 2 MIN. AFTER		D. RECUMBENT		E. AFTER STANDING 3 MIN.																										
59. DISTANT VISION				60. REFRACTION				61. NEAR VISION																																
RIGHT 20/ <u>25</u> CORR. TO 20/				BY S. OX				20-6 CORR. TO BY																																
LEFT 20/ <u>30</u> CORR. TO 20/				BY S. OX				20-6 CORR. TO BY																																
62. HETEROPHORIA (Specify distance)																																								
ES°		EX°		R. H.		L. H.		PRISM DIV.		PRISM CONV. CT		PC		PD																										
63. ACCOMMODATION				64. COLOR VISION (Test used and result)				65. DEPTH PERCEPTION (Test used and score)				UNCORRECTED																												
RIGHT LEFT				<u>HOC 1940 8/8</u>								CORRECTED																												
66. FIELD OF VISION				67. NIGHT VISION (Test used and score)				68. RED LENS TEST				69. INTRAOCULAR TENSION																												
70. HEARING				71. AUDIOMETER								72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)																												
RIGHT WV <u>15/15</u> SV <u>15/15</u>				<table border="1"> <tr> <td></td> <td>250 256</td> <td>500 512</td> <td>1000 1024</td> <td>2000 2048</td> <td>3000 2886</td> <td>4000 4096</td> <td>6000 6144</td> <td>8000 8192</td> </tr> <tr> <td>RIGHT</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>LEFT</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>									250 256	500 512	1000 1024	2000 2048	3000 2886	4000 4096	6000 6144	8000 8192	RIGHT									LEFT										
	250 256	500 512	1000 1024	2000 2048	3000 2886	4000 4096	6000 6144	8000 8192																																
RIGHT																																								
LEFT																																								
LEFT WV <u>15/15</u> SV <u>15/15</u>																																								

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

76. A. PHYSICAL PROFILE

P	U	L	H	E	S

77. EXAMINEE (Check)

- A. ☒ IS QUALIFIED FOR  
B. ☐ IS NOT QUALIFIED FOR

B. PHYSICAL CATEGORY

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

A	B	C	E

79. TYPED OR PRINTED NAME OF PHYSICIAN

SIGNATURE

80. TYPED OR PRINTED NAME OF PHYSICIAN

SIGNATURE

81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)

SIGNATURE

82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY

SIGNATURE

NUMBER OF ATTACHED SHEETS

# REPORT OF MEDICAL HISTORY

89-103

THIS INFORMATION IS FOR OFFICIAL USE ONLY AND WILL NOT BE RELEASED TO UNAUTHORIZED PERSONS

1. LAST NAME—FIRST NAME—MIDDLE NAME <b>MORRELL DONALD C.</b>		2. GRADE AND COMPONENT OR POSITION <b>FBI</b>	3. IDENTIFICATION NO.
4. HOME ADDRESS (Number, street or RFD, city or town, zone and State) <b>5516 CHARLCOTE ROAD, BETHESDA, MD.</b>		5. PURPOSE OF EXAMINATION <b>ANNUAL PHYSICAL</b>	6. DATE OF EXAMINATION <b>4-16-63</b>
7. SEX <b>M</b>	8. RACE <b>W</b>	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY _____ CIVILIAN _____	
10. AGENCY <b>FBI</b>		11. ORGANIZATION UNIT	
12. DATE OF BIRTH <b>JUNE 13, 1918</b>		13. PLACE OF BIRTH <b>BROOKLYN, NEW YORK</b>	
14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN <b>ELIZABETH H. MORRELL - WIFE 5516 CHARLCOTE ROAD, BETHESDA, MD.</b>		15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS	
16. OTHER INFORMATION			

17. STATEMENT OF EXAMINEE'S PRESENT HEALTH IN OWN WORDS. (Follow by description of past history, if complaint exists)

**GOOD**

b6  
b7c

18. FAMILY HISTORY					19. HAS ANY BLOOD RELATION (Parent, brother, sister, other) OR HUSBAND OR WIFE:			
RELATION	AGE	STATE OF HEALTH	IF DEAD, CAUSE OF DEATH	AGE AT DEATH	YES	NO	(Check each item)	RELATION(S)
FATHER			<b>Coronary occlusion</b>	<b>61</b>		<input checked="" type="checkbox"/>	HAD TUBERCULOSIS	
MOTHER	<b>71</b>	<b>Good</b>				<input checked="" type="checkbox"/>	HAD SYPHILIS	
SPOUSE	<b>44</b>	<b>Good</b>				<input checked="" type="checkbox"/>	HAD DIABETES	
	<b>78</b>	<b>Good</b>				<input checked="" type="checkbox"/>	HAD CANCER	
BROTHERS						<input checked="" type="checkbox"/>	HAD KIDNEY TROUBLE	
AND					<input checked="" type="checkbox"/>		HAD HEART TROUBLE	<b>Father</b>
<b>(SISTERS)</b>						<input checked="" type="checkbox"/>	HAD STOMACH TROUBLE	
						<input checked="" type="checkbox"/>	HAD RHEUMATISM (Arthritis)	
CHILDREN		<b>Good</b>			<input checked="" type="checkbox"/>		HAD ASTHMA, HAY FEVER, HIVES	<b>WIFE</b>
		<b>Good</b>				<input checked="" type="checkbox"/>	HAD EPILEPSY (Fits)	
						<input checked="" type="checkbox"/>	COMMITTED SUICIDE	
						<input checked="" type="checkbox"/>	BEEN INSANE	

20. HAVE YOU EVER HAD OR HAVE YOU NOW (Place check at left of each item)

YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)
<input checked="" type="checkbox"/>		SCARLET FEVER, ERYSIPELAS	<input checked="" type="checkbox"/>		GOITER	<input checked="" type="checkbox"/>		TUMOR, GROWTH, CYST, CANCER	<input checked="" type="checkbox"/>		"TRICK" OR LOCKED KNEE
<input checked="" type="checkbox"/>		DIPHTHERIA	<input checked="" type="checkbox"/>		TUBERCULOSIS	<input checked="" type="checkbox"/>		RUPTURE	<input checked="" type="checkbox"/>		FOOT TROUBLE
<input checked="" type="checkbox"/>		RHEUMATIC FEVER	<input checked="" type="checkbox"/>		BOAKING SWEATS (Night sweats)	<input checked="" type="checkbox"/>		APPENDICITIS	<input checked="" type="checkbox"/>		NEURITIS
<input checked="" type="checkbox"/>		SWOLLEN OR PAINFUL JOINTS	<input checked="" type="checkbox"/>		ASTHMA	<input checked="" type="checkbox"/>		PILES OR RECTAL DISEASE	<input checked="" type="checkbox"/>		PARALYSIS (Inc. infantile)
<input checked="" type="checkbox"/>		MUMPS	<input checked="" type="checkbox"/>		SHORTNESS OF BREATH	<input checked="" type="checkbox"/>		FREQUENT OR PAINFUL URINATION	<input checked="" type="checkbox"/>		EPILEPSY OR FITS
<input checked="" type="checkbox"/>		WHOOPING COUGH	<input checked="" type="checkbox"/>		PAIN OR PRESSURE IN CHEST	<input checked="" type="checkbox"/>		KIDNEY STONE OR BLOOD IN URINE	<input checked="" type="checkbox"/>		CAR, TRAIN, SEA, OR AIR SICKNESS
<input checked="" type="checkbox"/>		FREQUENT OR SEVERE HEADACHE	<input checked="" type="checkbox"/>		CHRONIC COUGH	<input checked="" type="checkbox"/>		SUGAR OR ALBUMIN IN URINE	<input checked="" type="checkbox"/>		FREQUENT TROUBLE SLEEPING
<input checked="" type="checkbox"/>		DIZZINESS OR FAINTING SPELLS	<input checked="" type="checkbox"/>		PALPITATION OR POUNDING HEART	<input checked="" type="checkbox"/>		BOILS	<input checked="" type="checkbox"/>		FREQUENT OR TERRIFYING NIGHTMARES
<input checked="" type="checkbox"/>		EYE TROUBLE	<input checked="" type="checkbox"/>		HIGH OR LOW BLOOD PRESSURE	<input checked="" type="checkbox"/>		VENEREAL DISEASE	<input checked="" type="checkbox"/>		DEPRESSION OR EXCESSIVE WORRY
<input checked="" type="checkbox"/>		EAR, NOSE OR THROAT TROUBLE	<input checked="" type="checkbox"/>		CRAMPS IN YOUR LEGS	<input checked="" type="checkbox"/>		RECENT GAIN OR LOSS OF WEIGHT	<input checked="" type="checkbox"/>		LOSS OF MEMORY OR AMNESIA
<input checked="" type="checkbox"/>		RUNNING EARS	<input checked="" type="checkbox"/>		FREQUENT INDIGESTION	<input checked="" type="checkbox"/>		ARTHRITIS OR RHEUMATISM	<input checked="" type="checkbox"/>		BED WETTING
<input checked="" type="checkbox"/>		CHRONIC OR FREQUENT COLDS	<input checked="" type="checkbox"/>		STOMACH, LIVER OR INTESTINAL TROUBLE	<input checked="" type="checkbox"/>		BONE, JOINT, OR OTHER DEFORMITY	<input checked="" type="checkbox"/>		NERVOUS TROUBLE OF ANY SORT
<input checked="" type="checkbox"/>		SEVERE TOOTH OR GUM TROUBLE	<input checked="" type="checkbox"/>		GALL BLADDER TROUBLE OR GALL STONES	<input checked="" type="checkbox"/>		LAMENESS	<input checked="" type="checkbox"/>		ANY DRUG OR NARCOTIC HABIT
<input checked="" type="checkbox"/>		SINUSITIS	<input checked="" type="checkbox"/>		JAUNDICE	<input checked="" type="checkbox"/>		LOSS OF ARM, LEG, FINGER, OR TOE	<input checked="" type="checkbox"/>		EXCESSIVE DRINKING HABIT
<input checked="" type="checkbox"/>		HAY FEVER	<input checked="" type="checkbox"/>		ANY REACTION TO SERUM, DRUG OR MEDICINE	<input checked="" type="checkbox"/>		PAINFUL OR "TRICK" SHOULDER OR ELBOW	<input checked="" type="checkbox"/>		HOMOSEXUAL TENDENCIES

21. HAVE YOU EVER (Check each item)

<input checked="" type="checkbox"/>	WORN GLASSES	<b>Now</b>	<input checked="" type="checkbox"/>	ATTEMPTED SUICIDE
<input checked="" type="checkbox"/>	WORN AN ARTIFICIAL EYE		<input checked="" type="checkbox"/>	BEEN A SLEEP WALKER
<input checked="" type="checkbox"/>	WORN HEARING AIDS		<input checked="" type="checkbox"/>	LIVED WITH ANYONE WHO HAD TUBERCULOSIS
<input checked="" type="checkbox"/>	STUTTERED OR STAMMERED		<input checked="" type="checkbox"/>	COUGHED UP BLOOD
<input checked="" type="checkbox"/>	WORN A BRACE OR BACK SUPPORT		<input checked="" type="checkbox"/>	BLED EXCESSIVELY AFTER INJURY OR TOOTH EXTRACTION

22. FEMALES ONLY: A. HAVE YOU EVER—

<input type="checkbox"/>	BEEN PREGNANT	<input type="checkbox"/>	AGE AT ONSET OF MENSTRUATION
<input type="checkbox"/>	HAD A VAGINAL DISCHARGE	<input type="checkbox"/>	INTERVAL BETWEEN PERIODS
<input type="checkbox"/>	BEEN TREATED FOR A FEMALE DISORDER	<input type="checkbox"/>	DURATION OF PERIODS
<input type="checkbox"/>	HAD PAINFUL MENSTRUATION	<input type="checkbox"/>	DATE OF LAST PERIOD
<input type="checkbox"/>	HAD IRREGULAR MENSTRUATION	QUANTITY: <input type="checkbox"/> NORMAL <input type="checkbox"/> EXCESSIVE <input type="checkbox"/> SCANTY	

23. HOW MANY JOBS HAVE YOU HAD IN THE PAST THREE YEARS?

**ONE**

24. WHAT IS THE LONGEST PERIOD YOU HELD ANY OF THESE JOBS?

**16 yrs**

25. WHAT IS YOUR USUAL OCCUPATION?

**Pol Agent**

26. ARE YOU (Check one)

☒ RIGHT HANDED ☐ LEFT HANDED

ENCLOSURE

-156 9/2/69

YES	NO	CHECK EACH ITEM YES OR NO. EVERY ITEM CHECKED "YES" MUST BE FULLY EXPLAINED IN BLANK SPACE ON RIGHT
	<input checked="" type="checkbox"/>	27. HAVE YOU BEEN UNABLE TO HOLD A JOB BECAUSE OF:
	<input checked="" type="checkbox"/>	A. SENSITIVITY TO CHEMICALS, DUST, SUNLIGHT, ETC.
	<input checked="" type="checkbox"/>	B. INABILITY TO PERFORM CERTAIN MOTIONS
	<input checked="" type="checkbox"/>	C. INABILITY TO ASSUME CERTAIN POSITIONS
	<input checked="" type="checkbox"/>	D. OTHER MEDICAL REASONS (If yes, give reasons)
	<input checked="" type="checkbox"/>	28. HAVE YOU EVER WORKED WITH RADIOACTIVE SUBSTANCE?
	<input checked="" type="checkbox"/>	29. DID YOU HAVE DIFFICULTY WITH SCHOOL STUDIES OR TEACHERS? (If yes, give details)
	<input checked="" type="checkbox"/>	30. HAVE YOU EVER BEEN REFUSED EMPLOYMENT BECAUSE OF YOUR HEALTH? (If yes, state reason and give details)
	<input checked="" type="checkbox"/>	31. HAVE YOU EVER BEEN DENIED LIFE INSURANCE? (If yes, state reason and give details)
<input checked="" type="checkbox"/>		32. HAVE YOU HAD, OR HAVE YOU BEEN ADVISED TO HAVE, ANY OPERATIONS? (If yes, describe and give age at which occurred)
	<input checked="" type="checkbox"/>	33. HAVE YOU EVER BEEN A PATIENT (committed or voluntary) IN A MENTAL HOSPITAL OR SANATORIUM? (If yes, specify when, where, why, and name of doctor, and complete address of hospital or clinic)
	<input checked="" type="checkbox"/>	34. HAVE YOU EVER HAD ANY ILLNESS OR INJURY OTHER THAN THOSE ALREADY NOTED? (If yes, specify when, where, and give details)
	<input checked="" type="checkbox"/>	35. HAVE YOU CONSULTED OR BEEN TREATED BY CLINICS, PHYSICIANS, HEALERS, OR OTHER PRACTITIONERS WITHIN THE PAST 5 YEARS? (If yes, give complete address of doctor, hospital, clinic, and details)
	<input checked="" type="checkbox"/>	36. HAVE YOU TREATED YOURSELF FOR ILLNESSES OTHER THAN MINOR COLD? (If yes, which illnesses)
	<input checked="" type="checkbox"/>	37. HAVE YOU EVER BEEN REJECTED FOR MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date and reason for rejection)
	<input checked="" type="checkbox"/>	38. HAVE YOU EVER BEEN DISCHARGED FROM MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date, reason, and type of discharge: whether honorable, other than honorable, for unfitness or unsuitability)
	<input checked="" type="checkbox"/>	39. HAVE YOU EVER RECEIVED, IS THERE PENDING, HAVE YOU APPLIED FOR, OR DO YOU INTEND TO APPLY FOR PENSION OR COMPENSATION FOR EXISTING DISABILITY? (If yes, specify what kind, granted by whom, and what amount, when, why)

T & A yes

I CERTIFY THAT I HAVE REVIEWED THE FOREGOING INFORMATION SUPPLIED BY ME AND THAT IT IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.  
I AUTHORIZE ANY OF THE DOCTORS, HOSPITALS, OR CLINICS MENTIONED ABOVE TO FURNISH THE GOVERNMENT A COMPLETE TRANSCRIPT OF MY MEDICAL RECORD FOR PURPOSES OF PROCESSING MY APPLICATION FOR THIS EMPLOYMENT OR SERVICE.

TYPED OR PRINTED NAME OF EXAMINEE

DONALD C. MORRELL

SIGNATURE

Donald C. Morrell

40. PHYSICIAN'S SUMMARY AND ELABORATION OF ALL PERTINENT DATA (Physician shall comment on all positive answers in items 20 thru 39)

yes

TYPED OR PRINTED NAME OF PHYSICIAN OR EXAMINED

DATE

4/16/63

SIGNATURE

EA [Signature]

NUMBER OF ATTACHED SHEETS

Mr. Morrell:

Please advise if your vision has  
been corrected to 20/20.

Physical Unit 4541

Yes - Wear corrective glasses  
Don  
5/9/63

ENCLOSURE

17-221-156

Please Return Only  
to Staff Office  
For Outpatient Consultation Sheet

U.S. GOVERNMENT PRINTING OFFICE: 1962-642950

CLINICAL RECORD

CONSULTATION SHEET

TO:

*M. & H.*

REQUEST

FROM: (Requesting ward, unit, or activity)

DATE OF REQUEST

4-10-63

REASON FOR REQUEST (Complaints and findings)

*Please see & advise*

PROVISIONAL DIAGNOSIS

DOCTOR'S SIGNATURE

APPROVED

PLACE OF CONSULTATION

☐ BEDSIDE

☐ ON CALL

☐ EMERGENCY

☐ ROUTINE

CONSULTATION REPORT

*Chronic Disease, Chronic for  
years.*

*Examination: Basal*

*Flare - Marked deflected system*

*to spine extending middle*

*location. Large large*

*flame / flame*

*flame to  
flame T-13*

*(R) cont. cont.*

*Reflected for S. H. R.*

*May 15*

*Reflected*

SIGNATURE AND TITLE

DATE

IDENTIFICATION NO.

ORGANIZATION

PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)

REGISTER NO.

WARD NO.

*MORRELL, Donald C*

CONSULTATION SHEET  
Standard Form 513  
513-104-02

*Sp. 19. F B D  
B. 19*

*OK  
J. B. K. 19*

Attachment to Standard Form 88, Report of Medical Examination  
For Information and Guidance of Medical Examiner

Name of Examinee MORRELL DONALD C.  
(Type or print) Last First Middle

The following portions of the attached examination report form need not be completed:

2	14	68
3	17	69
4	62	72
9	65	76
11	67	

46. Is necessary unless facilities for affording same are not readily available.
48. Not required unless examinee is over 35 years of age or examination indicates such is desirable.
49. Is necessary unless facilities for affording same are not readily available.
71. Audiometer examinations should be afforded whenever possible for all Special Agent applicants and Special Agents. Applicants for the Special Agent position will not be accepted if the hearing loss exceeds a 15 decibel average in each ear in the conversational speech range (500, 1000, 2000 cycles).

For All Examinees, Whether Clerical or Special Agent Applicants or Employees:

The medical examiner should answer the following question:

Examinee ☒ is ☐ is not qualified for strenuous physical exertion.

To be Answered in the Case of All Male Employees and Male Applicants:

1. Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

2. Does examinee have any defects prohibiting safe operation of motor vehicles?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

3. For safe driving of motor vehicles, Civil Service Commission requires distant vision must test at least 20/40 in one eye and 20/100 in the other, corrected or uncorrected. Should examinee wear corrective glasses while operating a motor vehicle? ☐ Yes ☒ No

If recommendation is based on a factor other than above standard, indicate basis \_\_\_\_\_

ENCLOSURE

17-421012-156

6009

Desirable Weight Ranges for Males

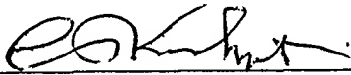
Height	Small Frame	Medium Frame	Large Frame
5' 4"	117 - 125	123 - 135	131 - 148
5' 5"	120 - 129	126 - 139	134 - 152
5' 6"	124 - 133	130 - 143	138 - 157
5' 7"	128 - 137	134 - 148	143 - 162
5' 8"	132 - 141	138 - 152	147 - 166
5' 9"	136 - 146	142 - 156	151 - 170
5' 10"	140 - 150	146 - 161	155 - 175
5' 11"	144 - 154	150 - 166	160 - 180
6' 0"	148 - 158	154 - 171	164 - 185
6' 1"	152 - 163	158 - 176	169 - 190
6' 2"	156 - 167	163 - 181	174 - 195
6' 3"	160 - 171	168 - 186	178 - 200
6' 4"	169 - 180	178 - 196	188 - 210
6' 5"	174 - 185	182 - 202	192 - 216

3. Examinee's frame is ☐ small ☐ medium ☒ large

4. Considering above weight table, the examinee's frame, and other individual physical characteristics, I consider his present weight ☒ Satisfactory ☐ Excessive ☐ Deficient

5. Under proper medical supervision, examinee should ☐ lose \_\_\_\_\_ pounds  
☐ gain \_\_\_\_\_ pounds

Remarks: \_\_\_\_\_

  
 (Signature of Medical Examiner)

4/16/63  
 (Date)



<b>CLINICAL RECORD</b>						<b>ELECTROCARDIOGRAPHIC RECORD</b>				PREVIOUS ECG <input type="checkbox"/> YES <input type="checkbox"/> NO	
CLINICAL IMPRESSION						MEDICATION				<input type="checkbox"/> EMERGENCY <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ROUTINE <input type="checkbox"/> AMBULANT	
AGE 44	SEX M	RACE 5-7	HEIGHT 157	WEIGHT	B. P.	SIGNATURE OF WARD PHYSICIAN 4/6/63@ 1050				DATE	
RHYTHM Sinus						AXIS DEVIATION (QRS) +75				RATES AURIC. VENT 54	
INTERVALS PR .20 QRS .16 QT .40						P WAVES diphasic III					
QRS COMPLEXES normal											
RS-T SEGMENT slightly elevated II						T WAVES normal					
UNIPOLAR EXTREMITY LEADS (Specify)											

PRECARDIAL LEADS (Specify)

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:  
1. Sinus bradycardia

(Continue on reverse)

NO. ECG	SIGNATURE G MITCHELL /js	TITLE LT MC USNR	DATE 4/16/63
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)		REGISTER NO.	WARD NO.
MORRELL DONALD C FBI			ST CL

**ELECTROCARDIOGRAPHIC RECORD**  
Standard Form 520  
520-104  
(Attach tracings to S. F. 507)

17-111 - 15044

UNITED STATES GOVERNMENT

# Memorandum

TO : Director, FBI

DATE: 5-27-63

FROM : ~~XXX~~ Mr. DeLoach *DeLoach*

Attention: Personnel Section

SUBJECT: DONALD C. MORRELL

☐ Remylet \_\_\_\_\_  
☐ ReBulet \_\_\_\_\_

- ☐ Re physical examination \_\_\_\_\_  
☐ Dental work was completed on \_\_\_\_\_  
☐ Vision has been corrected to \_\_\_\_\_  
☐ Results of ☐ chest X ray ☐ patch test ☐ urinalysis ☐ serology were negative.  
☐ Enclosed physician's statement indicates he is qualified for strenuous physical exertion and use of firearms.  
☐ Enclosed are ☐ paid ☐ unpaid medical bills.  
☐ Attached are Bureau of Employees' Compensation forms \_\_\_\_\_  
  
☐ Physical examination reports are enclosed.  
☐ Employee is scheduled for physical examination on \_\_\_\_\_  
☐ Physical examination report has been reviewed and initialed.  
☐ Employee has been instructed to wear corrective glasses while operating a motor vehicle.  
☒ Employee returned to active duty 5-27-63  
☒ Employee's physical condition is Satisfactory  
☐ UACB he is being removed from limited duty.  
☐ UACB he is being placed on limited duty.

Remarks:

Attached if Form FD-300 executed by the operating surgeon,  
Dr. William C. Monell.

Enclosure

*ENCLOSURE att*

*Noted  
5-28-63  
cpe*

*3/1  
mick*

*145*  
*NOT RECORDED*

**Attachment to Standard Form 88, Report of Medical Examination  
For Information and Guidance of Medical Examiner**

Name of Examinee Morrell, Donald C.  
(Type or print) *Last* *First* *Middle*

The following portions of the attached examination report form need not be completed:

2	14	68
3	17	69
4	62	72
9	65	76
11	67	

46. Is necessary unless facilities for affording same are not readily available.
48. Not required unless examinee is over 35 years of age or examination indicates such is desirable.
49. Is necessary unless facilities for affording same are not readily available.
71. Audiometer examinations should be afforded whenever possible for all Special Agent applicants and Special Agents. Applicants for the Special Agent position will not be accepted if the hearing loss exceeds a 15 decibel average in each ear in the conversational speech range (500, 1000, 2000 cycles).

**For All Examinees, Whether Clerical or Special Agent Applicants or Employees:**

*The medical examiner should answer the following question:*

✓ Examinee ☒ is ☐ is not qualified for strenuous physical exertion.

**To be Answered in the Case of All Male Employees and Male Applicants:**

- ✓ 1. Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

- ✓ 2. Does examinee have any defects prohibiting safe operation of motor vehicles?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

- ✓ 3. For safe driving of motor vehicles, Civil Service Commission requires distant vision must test at least 20/40 in one eye and 20/100 in the other, corrected or uncorrected. Should examinee wear corrective glasses while operating a motor vehicle? ☐ Yes ☒ No  
If recommendation is based on a factor other than above standard, indicate basis \_\_\_\_\_

**ENCLOSURE**

Desirable Weight Ranges for Males

Height	Small Frame	Medium Frame	Large Frame
5' 4"	117 - 125	123 - 135	131 - 148
5' 5"	120 - 129	126 - 139	134 - 152
5' 6"	124 - 133	130 - 143	138 - 157
5' 7"	128 - 137	134 - 148	143 - 162
5' 8"	132 - 141	138 - 152	147 - 166
5' 9"	136 - 146	142 - 156	151 - 170
5' 10"	140 - 150	146 - 161	155 - 175
5' 11"	144 - 154	150 - 166	160 - 180
6'	148 - 158	154 - 171	164 - 185
6' 1"	152 - 163	158 - 176	169 - 190
6' 2"	156 - 167	163 - 181	174 - 195
6' 3"	160 - 171	168 - 186	178 - 200
6' 4"	169 - 180	178 - 196	188 - 210
6' 5"	174 - 185	182 - 202	192 - 216

3. Examinee's frame is ☐ small ☐ medium ☐ large

4. Considering above weight table, the examinee's frame, and other individual physical characteristics, I consider his present weight ☐ Satisfactory ☐ Excessive ☐ Deficient

5. Under proper medical supervision, examinee should ☐ lose \_\_\_\_\_ pounds  
☐ gain \_\_\_\_\_ pounds

Remarks: \_\_\_\_\_

*William C. Morell MD*  
 (Signature of Medical Examiner)

*5/27/63*  
 (Date)

May 17, 1963

Mr. Donald C. Morrell  
U. S. Naval Hospital  
Bethesda, Maryland

Dear Mr. Morrell:

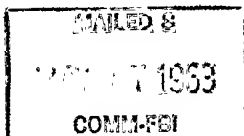
I have learned that it was necessary for you to undergo surgery, and hope this note finds you progressing satisfactorily.

Let me urge you to heed your doctor's instructions carefully and devote yourself entirely to your convalescence.

With kind regards,

Sincerely,

J. Edgar Hoover



1 - Mr. DeLoach (Personal Attention)

JSW

(4)

Health Service telephonically advised the Leave Office on 5-16-63, that employee underwent surgery for deviated nasal septum at above hospital 5-16-63, and that his condition is satisfactory.

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Evans \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

MAIL ROOM ☐ TELETYPE UNIT ☐



UNITED STATES DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION

In Reply, Please Refer to  
File No.

Director  
Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C.

Dear Sir:

For inclusion in the fund to be paid to the designated beneficiary of any Special Agent of the FBI who has previously contributed to this fund and who dies from any cause except self-destruction while employed as a Special Agent, I am forwarding herewith (by Check - Money Order) the sum of \$10, payable to S.A.I.F., to be included in said fund. Payment will be made for death by self-destruction after the Agent has been a member of the fund for a continuous period of two years. It is understood and agreed that the sum tendered herewith is a voluntary, gratuitous contribution to said fund which I understand is to be administered in the following manner.

The Director of the FBI will appoint a committee which shall consider all matters pertaining to the acquisition, safe keeping and expending of said fund, which committee will recommend appropriate action to the Director in pertinent matters. The Assistant Director of the Administrative Division of the FBI shall receive all contributions and account for same to the Director. Upon the death of any Special Agent who is a member of said fund the appointed committee will consider the case and submit a recommendation to the Director as to its conclusions. Appropriate instructions will then be issued to the Assistant Director of the Administrative Division, directing him to pay to the designated beneficiary the sum of \$10,000. The liability of the fund shall not under any circumstances exceed the amount of monies in the fund at the time any liability shall occur.

EXECUTE IN DUPLICATE AND SUBMIT BOTH COPIES TO THE BUREAU

Official Bureau Name (please type or print)	Date	Office of Assignment (or SOG Division)
SA Donald C. Morrell	7-22-63	Crime Records Division

The following person is designated as my beneficiary for Special Agents Insurance Fund:

Name (primary beneficiary; use given first name if female) Elizabeth H. Morrell	Relationship Wife
--	----------------------

Address 5516 Charlcote Road, Bethesda 14, Maryland	
---	--

Name (contingent beneficiary, if desired; use given first name if female) Estate	Relationship
---	--------------

Address	
---------	--

The following person is designated as my beneficiary under the Chas. S. Ross Fund providing \$1500 death benefit to beneficiary of agents killed in the line of duty, other than travel accidents.


Name (primary beneficiary; use given first name if female) Elizabeth H. Morrell	Relationship Wife
--	----------------------

Address 5516 Charlcote Road, Bethesda 14, Maryland	
---	--

Name (contingent beneficiary, if desired; use given first name if female) Estate	Relationship
---	--------------

Address	
---------	--

Very truly yours,

  
 Donald C. Morrell  
 Special Agent

Payment Forwarded  
Special Agents Insurance Fund

AUG 13 1963

23  
J. Edgar Hoover, Director

UNITED STATES GOVERNMENT

*Memorandum*

Tolson \_\_\_\_\_  
 Belmont \_\_\_\_\_  
 Mohr \_\_\_\_\_  
 Casper \_\_\_\_\_  
 Callahan \_\_\_\_\_  
 Conrad \_\_\_\_\_  
 DeLoach \_\_\_\_\_  
 Evans \_\_\_\_\_  
 Gale \_\_\_\_\_  
 Rosen \_\_\_\_\_  
 Sullivan \_\_\_\_\_  
 Tavel \_\_\_\_\_  
 Trotter \_\_\_\_\_  
 Tele. Room \_\_\_\_\_  
 Holmes \_\_\_\_\_  
 Gandy \_\_\_\_\_

TO : Mr. DeLoach

DATE: 9-24-68

FROM : D. C. Morrell *[Signature]*

SUBJECT: BUREAU WEIGHT PROGRAM

Supervisors in the Correspondence and Tours Section, Crime Records Division, listed below have been weighed by the Bureau Health Service and all are within the desirable weight range for their heights and frames:

*[Redacted]*  
 James C. Farrington  
*[Redacted]*  
 Donald C. Morrell  
*[Redacted]*  
 William H. Stanleton  
*[Redacted]*

b6  
 b7c

RECOMMENDATION:

For information.

mlw  
 (2) *[Signature]*

REC-115

463 070-76  
 75-  
 JUN 25 1968

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

DATE 02-11-81 BY SP-6 JRS

100-2-1063

13

SEP 1 1968

*3/18*

PATIENT'S LAST NAME-FIRST NAME-MIDDLE NAME

REGISTER NO.

WARD NO.

Mrrell, Donald  
Chief med. office

AGE SEX (Check one)

☐ BEDSIDE, WHEELCHAIR,  
OR STRETCHER

☐ BED  
PATIENT

☐ AMBULATORY

EXAMINATION REQUESTED

Spine - Outside Film Review

REQUESTED BY

DATE OF REQUEST

Chief med. off. July 63

(Above space for mechanical imprinting, if used)

PERTINENT CLINICAL HISTORY, OPERATIONS, PHYSICAL FINDINGS, AND PROVISIONAL DIAGNOSIS

Review of Outside Films -

FILM NO.

DATE OF REPORT

RADIOGRAPHIC REPORT

TYPED 26 JULY

OUTSIDE FILM REVIEW -

THREE VIEWS OF THE LUMBAR SPINE show the lumbar vertebral bodies and intervertebral disc spaces to be unremarkable, except for some narrowing of the L-5 - S-1 intervertebral disc space, posteriorly. There is some slight sclerosis of the vertebral surfaces at this level. There are numerous calcific densities scattered throughout the pelvis and, of course, ~~there~~ a small uteral calculus cannot be ruled out without contrast studies. Soft tissues of the abdomen are unremarkable. An incidental finding is the presence of some calcification in the abdominal aorta at the region of L-3 - L-4, but no distinct ~~any~~ aneurysmal dilatation is identified and the amount of calcification is compatible with the patient's age of 45.

SIGNATURE: (Specify location of laboratory if not part of requesting facility)

CONTINUED

Standard Form 519A (Rev. Aug. 1954)  
Promulgated by Bureau of the Budget  
Circular A-32 (Rev.)

RADIOGRAPHIC REPORT

519-205

(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)



633043

- 2 -

PATIENT'S LAST NAME-FIRST NAME-MIDDLE NAME		REGISTER NO.	WARD NO.
MORRILL, Donald			CHIEF, MED. OFF
AGE	SEX	(Check one)	
		<input type="checkbox"/> BEDSIDE, WHEELCHAIR, OR STRETCHER <input type="checkbox"/> BED PATIENT <input type="checkbox"/> AMBULATORY	
EXAMINATION REQUESTED			
L-SPINE - Outside film review			
REQUESTED BY			DATE OF REQUEST
			JULY 1963

(Above space for mechanical imprinting, if used)

PERTINENT CLINICAL HISTORY, OPERATIONS, PHYSICAL FINDINGS, AND PROVISIONAL DIAGNOSIS

FILM NO.	DATE OF REPORT
----------	----------------

## RADIOGRAPHIC REPORT

No other findings of note are seen.

IMPRESSION: Considering the patient's age, the study is unremarkable from a roentgen standpoint. JAU:vm

Department of Radiology  
 U. S. Naval Hospital  
 National Naval Medical Center  
 Bethesda 14, Maryland

SIGNATURE: (Specify location of laboratory if not part of requesting facility)

Standard Form 519A (Rev. Aug. 1955)  
 Promulgated by Bureau of the Bureau  
 Circular A-32 (Rev.)  
 RADIOGRAPHIC REPORT  
 519-205

(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)

J. A. USSEL  
 LT MC USN

17-401-10

UNITED STATES GOVERNMENT

*Memorandum*

Tolson	_____
Belmont	_____
Mohr	_____
Casper	_____
Callahan	_____
Conrad	_____
DeLoach	_____
Evans	_____
Gale	_____
Rosen	_____
Sullivan	_____
Tavel	_____
Trotter	_____
Tele. Room	_____
Holmes	_____
Gandy	_____

TO : Mr. DeLoach

DATE: July 31, 1963

FROM : D. C. Morrell *DCM*

SUBJECT: DONALD C. MORRELL  
 Section Chief  
 Correspondence and Tours Section  
 Crime Records Division  
 HEALTH MATTER

*W. H. DeLoach*

During early June, I wrenched my back and suffered severe pain and discomfort. Being unable to walk or straighten up, I went to Dr. A. F. Dilworth, 1835 K Street, Northwest, an osteopathic physician. He was able to afford me freedom enough to walk and carry on my regular duties; however, continuing visits to him were necessary over an extended period of time. When the pain and stiffness persisted and since Dr. Dilworth's diagnosis was a dislocated vertebra in the sacro-lumbar region, X-rays were taken by Dr. Alfred A. J. Den, Radiologist, 1801 Eye Street, Northwest, on 7-19-63.

Dr. Den's report, a copy of which is attached, reflected no abnormality in the spine, sacrum and pelvis. His report reflected, "Rather marked sclerotic changes are noted in the abdominal aorta, slightly unusual for a patient of this age." Dr. Dilworth explained that this might mean I had the early stages of arteriosclerosis, or hardening of the arteries.

Consequently, I obtained the X-rays, furnished them to the Physical Unit of the Administrative Division, which had them reviewed by our facilities at the Bethesda Naval Hospital. A report from the Chief Medical Officer dated July 26th, a copy of which is attached, reflected that the three views of the lumbar spine were unremarkable except for some narrowing of the L-5-S-1 intervertebral disc, posteriorly. There is some slight sclerosis of the vertebral surfaces at this level and there were numerous calcific densities scattered throughout the pelvis. An incidental finding was the presence of some calcification in the abdominal aorta but no distinct aneurysmal dilatation was identified and the amount of calcification was compatible with my age. The impression was, "Considering the patient's age, the study is unremarkable from a roentgen standpoint."

Enclosures

DCM:mlw (3)

REC-135

67-11-1-157  
 30 AUG 2 1963

(Cont'd next page)



*3 W. H. DeLoach*

Morrell to DeLoach memo

My back, while not completely back to normal, is improving, and I am able to perform all my normal functions.

RECOMMENDATION:

For record purposes and referral to the Administrative Division.



NATIONAL 8-2540  
REPUBLIC 7-4600

PRACTICE LIMITED TO  
RADIOLOGY

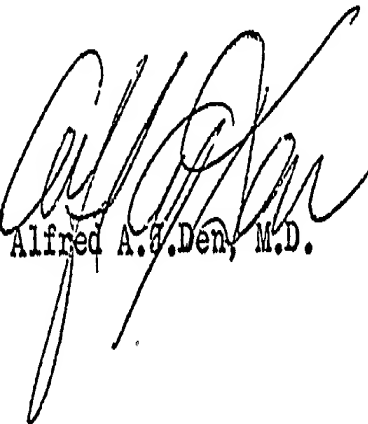
*Alfred A. J. Den, M.D.*

1801 EYE STREET, N.W.  
WASHINGTON 6, D. C.

July 20, 1963

Report of Roentgenograms on Mr. Donald Morrell for Dr. A.F. Dilworth, taken on  
7/19/63

Antero-posterior and lateral films of the lumbar vertebrae, sacrum and pelvis with an erect AP view shows no bone or joint abnormality. The intervertebral spaces show a normal relationship and are well maintained. There are no pathologic changes in the sacro-iliac or hip joints. Rather marked sclerotic changes are noted in the abdominal aorta, slightly unusual for a patient of this age.

  
Alfred A. J. Den, M.D.

ENCLOSURE 17-421-12-1157

SAC Mr. DeLoach

October 22, 1963

Director, FBI

Donald C. Morrell  
SPECIAL AGENT

The above-captioned Special Agent attended the following training course(s):

In-Service: from 10/7/63 to 10/18/63

☐ Criminal☐ Accounting☐ Security☐ Expert Firearms-Defensive Tactics☐ Basic☐ Advanced

☒ Criminal Intelligence In-Service #2

The firearms scores should be entered on the individual field firearms training record (FD-40). The following grades were attained.

Notebook \_\_\_\_\_  
Examination \_\_\_\_\_  
Shotgun Course #2 \_\_\_\_\_ 19/25  
Rifle \_\_\_\_\_ 92  
Machine Gun \_\_\_\_\_ 94

MAILED 11  
OCT 22 1963  
COMM-FBI  
Specialized Training:

Admin. Firearms: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
: \_\_\_\_\_

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Evans \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

1-SA

DONALD C. MORRELL  
CRIME RECORDS DIVISION

HLS:pab

(3)

MAIL ROOM ☐ TELETYPE UNIT ☐



# FEDERAL BUREAU OF INVESTIGATION

NAME: LAST, FIRST, MIDDLE	SOCIAL SECURITY NUMBER
---------------------------	------------------------

## NOTIFICATION OF BASIC CHANGE

CODE -- NATURE OF ACTION		EFFECTIVE DATE	DATE OF LAST EQUIV. INCR.
<input type="checkbox"/> 892 -- QUALITY INCREASE	<input type="checkbox"/> 896 -- ADMIN. PAY INCREASE		
<input type="checkbox"/> 893 -- WITHIN GRADE INCREASE	<input type="checkbox"/> 897 -- ADMIN. PAY DECREASE		
<input type="checkbox"/> 894 -- PAY ADJUSTMENT	OTHER (SPECIFY IN REMARKS)		
GRADE OR LEVEL	STEP OR RATE	OLD SALARY	NEW SALARY

## DATA ON UNPAID ABSENCE

PERIOD(S)	TOTAL EXCESS	IN PAY STATUS AT END OF WAITING PERIOD	INITIALS
			<i>3/1/66</i>

☐ EMPLOYEE'S WORK IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.

☐ EMPLOYEE'S PERFORMANCE RATING IS SATISFACTORY OR BETTER.

REMARKS

67-NOT RECORDED  
18 DEC 9 1963

*J. Edgar Hoover*

JOHN EDGAR HOOVER  
DIRECTOR

(DATE)

PERSONNEL FILE COPY



UNITED STATES DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION

*In Reply, Please Refer to  
File No.*

Director  
Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C.

Dear Sir:

For inclusion in the fund to be paid to the designated beneficiary of any Special Agent of the FBI who has previously contributed to this fund and who dies from any cause except self-destruction while employed as a Special Agent, I am forwarding herewith (by Check - Money Order) the sum of \$10, payable to S.A.I.F., to be included in said fund. Payment will be made for death by self-destruction after the Agent has been a member of the fund for a continuous period of two years. It is understood and agreed that the sum tendered herewith is a voluntary, gratuitous contribution to said fund which I understand is to be administered in the following manner.

The Director of the FBI will appoint a committee which shall consider all matters pertaining to the acquisition, safe keeping and expending of said fund, which committee will recommend appropriate action to the Director in pertinent matters. The Assistant Director of the Administrative Division of the FBI shall receive all contributions and account for same to the Director. Upon the death of any Special Agent who is a member of said fund the appointed committee will consider the case and submit a recommendation to the Director as to its conclusions. Appropriate instructions will then be issued to the Assistant Director of the Administrative Division, directing him to pay to the designated beneficiary the sum of \$10,000. The liability of the fund shall not under any circumstances exceed the amount of monies in the fund at the time any liability shall occur.

**EXECUTE IN DUPLICATE AND SUBMIT BOTH COPIES TO THE BUREAU**

Official Bureau Name (please type or print)	Date	Office of Assignment (or SOG Division)
SA Donald C. Morrell	1-27-64	Crime Records (SOG)

The following person is designated as my beneficiary for Special Agents Insurance Fund:

Name (primary beneficiary; use given first name if female)	Relationship
Elizabeth H. Morrell	wife
Address	
5516 Charlcoote Road, Bethesda, Maryland	
Name (contingent beneficiary, if desired; use given first name if female)	Relationship
Estate	
Address	

The following person is designated as my beneficiary under the Chas. S. Ross Fund providing \$1500 death benefit to beneficiary of agents killed in the line of duty, other than travel accidents.

Name (primary beneficiary; use given first name if female)	Relationship
Elizabeth H. Morrell	wife
Address	
5516 Charlcoote Road, Bethesda, Maryland	
Name (contingent beneficiary, if desired; use given first name if female)	Relationship
Estate	
Address	

Very truly yours,

Payment Received  
Special Agents Insurance Fund

FEB 19 1964

J. Edgar Hoover, Director

*Donald C. Morrell*  
Special Agent

72



Field Firearms Training Record  
FD-40 (Rev. 12-11-59)

Special Agent MORRELL, DONALD C. current thru 1960

Office	Date	Indoor	DA	PPC SA	PPC DA	SG #1	SG #2	SG #3	In Service		DT		
	Day-Month-Year								Rifle	MG			
SOG	2-9-61	270											
"	3-23-61	268											
"	4-11-61		92	94				100			✓	R.D.	
SOG	6/14/61		100		92		14				DT	Gas	
SOG	8/16/61		90	93				80			DT		
SOG	10/20/61		100		82		15				DT	BA	
SOG	11/20/61	246											
SOG	3/1/62	283											
<del>SOG</del>	<del>3/1/62</del>	<del>283</del>											
SOG	3/1/62	277											
SOG	3/21/62	289											
SOG	3/21/62		94	92	80						DT	RD	
SOG	5/18/62		90		92		13				DT	Gas	
SOG	7/6/62		100	96				100			✓	S	
SOG	11/9/62		100		95		17				✓	BA	
SOG	12/18/62	262											
SOG	1/29/63	261 <sup>my</sup>											
SOG	1/29/63	265											
SOG	3-19-63	267											
SOG	4-8-63		96	98		100					✓	RD	
SOG	5-31-63		96		83		18				✓	Gas	
SOG	8-9-63		90	97				100			✓	S	
<del>SOG</del>	10-14-63						19		92	94			
SOG	11-26-63	283	66										
SOG	9-22-64	289			81								
SOG	1-22-64	284											

File



UNITED STATES DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION

In Reply, Please Refer to  
File No.

WASHINGTON 25, D. C.

December 4, 1963

MEMORANDUM TO MR. TOLSON

DONALD C. MORRELL

MR. BELMONT  
MR. MOHR  
MR. CASPER  
MR. CALLAHAN  
MR. CONRAD  
MR. DE LOACH  
MR. EVANS  
MR. GALE  
MR. ROSEN  
MR. SULLIVAN  
MR. TAVEL  
MR. TROTTER  
MISS HOLMES

RE: COMMENDATION, NOVEMBER 25, 1963

I want you to convey my sincere appreciation to the personnel in your division who so graciously volunteered to work on November 25, 1963, in connection with the emergency occasioned by the assassination of the President.

Their devotion to duty and obvious desire to be of assistance and to protect the best interests of the Bureau during this trying time were of the highest caliber and a credit to them. Please extend to all my sincere and heartfelt thanks.

Very truly yours,

J. Edgar Hoover

John Edgar Hoover

Director

RECEIVED  
FBI

DEC 2 15 33 PM '63

RECEIVED  
FBI

March 31, 1964

PERSONAL

Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Morrell:

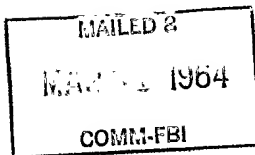
You recently prepared an official communication which contained an erroneous statement. The mistake in question was a very serious one and could have proven very embarrassing if it had not been detected by a Bureau official before the letter was sent out. There was absolutely no justification on your part in this instance.

In view of the above, you will be expected to demonstrate a higher degree of accuracy and efficiency in carrying out your assignments in the future so that you will not again be responsible for such a serious dereliction.

REC-142 67-41104-158  
Very truly yours,

J. Edgar Hoover

John Edgar Hoover  
Director



JIC:pab  
(5)

- 1 - Mr. DeLoach (Personal Attention)  
1 - Crime Records Division Personnel File

Based on memo from C. D. DeLoach to Mr. Mohr 3-30-64 CDD:mlk.

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Evans \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

MAIL ROOM ☐ TELETYPE UNIT ☐

UNITED STATES GOVERNMENT

# Memorandum

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
DeLoach ☒  
Evans \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

TO : Mr. Mohr

DATE: 3-30-64

FROM : C. D. DeLoach *CD*

SUBJECT:

b6  
b7C

## ERROR IN CORRESPONDENCE

Under date of 3-26-64 SA Donald C. Morrell prepared a letter to captioned individual wherein the phrase was contained, "You may wish to refer to my latest book on communism, "Masters of Deceit." In revising this letter and changing certain phrases he inadvertently changed the word "other" to "latest" making the sentence incorrect. Mr. Tolson caught the error and returned it for correction.

## RECOMMENDATION:

In accordance with existing regulations, it is recommended that SA Donald C. Morrell be censured. Proposed letter of censure attached.

1 - Mr. Cavanaugh  
1 -

CDD:mlk (6)

*mlk*  
Enclosure *sent 3-31-64*

*72*

61-431	043-159
SEARCHED	55
5 APR 8 1964	

*72*

*72*

*72*

RECS. REC. UNIT

*St. Zinn*

**FEDERAL BUREAU OF INVESTIGATION  
UNITED STATES DEPARTMENT OF JUSTICE**

REPORT OF PERFORMANCE RATING

*W. B. Blumer*  
*Asst. Dir. Section*  
*Asst. Dir. Sec. 1*

Name of Employee: DONALD C. MORRELL

Where Assigned: Crime Records Division Correspondence and Tours Section  
(Division) (Section, Unit)

Official Position Title: Special Agent - Chief, Correspondence and Tours Section

Rating Period: from 4-1-63 to 3-31-64

ADJECTIVE RATING: EXCELLENT  
Outstanding, Excellent, Satisfactory, Unsatisfactory

Employee's  
Initials

*DCM*

Rated by:

*C. H. L. Loom*

Signature

Assistant Director

Title

3/31/64

Date

Reviewed by:

Signature

Title

Date

Rating Approved by:

*W. B. Blumer*

Signature

Assistant Director

Title

APR 7 1964

Date

TYPE OF REPORT

- (X) Official  
(X) Annual

REC-148

67-421042-160	
( )	Administrative
( )	60-Day
( )	90-Day
( )	Transfer
( )	Separation from Service
( )	Special

*3/10/64*

70

## NARRATIVE COMMENTS

Note: The regulations require that OUTSTANDING ratings be supported by a statement in writing setting forth IN DETAIL the performance IN EVERY ASPECT and the REASONS for considering each worthy of SPECIAL COMMENDATION. UNSATISFACTORY ratings must be supported by a statement in writing stating (1) WHEREIN the performance is unsatisfactory, (2) the facts of the (90 day) PRIOR WARNING, and (3) the efforts made AFTER THE WARNING TO HELP the employee bring his performance up to a satisfactory level.

# PERFORMANCE RATING GUIDE FOR INVESTIGATIVE PERSONNEL

(For use as attachment to Performance Rating Form No. FD-185)

Name of Employee Donald C. MorrellTitle Special AgentRating Period: from 4-1-63 to 3-31-64

## RATING GUIDE AND CHECK-LIST

Note: Only those items having pertinent bearing on employee's performance should be rated. All employees in same salary grade should be compared. Rate items as follows:

- + Outstanding (exceeding excellent and deserving of special commendation).  
E Excellent.  
✓ Satisfactory (good or very good).  
- Unsatisfactory.  
O No opportunity to appraise performance during rating period.

Guide for determining adjective rating:

- "Outstanding" adjective rating requires (A) that all rated elements be "+" and (B) that each and every rated element be factually justified by narrative detail on reverse of Form FD-185.
- "Excellent," "Satisfactory" or "Unsatisfactory" adjective ratings will depend upon the composite result of evaluating all rated elements rather than following any mechanical formulas; however, for an employee to be rated "Excellent" he must not be rated unsatisfactory on any performance evaluation factors on the rating guide and check-list and must be rated "Excellent" or "Outstanding" on the majority of such rating factors. Good judgment must be exercised to insure that adjective rating is reasonable in the light of elements rated.
  - Any element rated "Unsatisfactory" must be supported by narrative comments.
  - An "official" adjective rating of "Unsatisfactory" must comply with the requirements described on the reverse of form FD-185.

- |   |   |
|---|---|
| <u>+</u> (1) Personal appearance.   | <u>E</u> (17) Firearms ability.   |
| <u>+</u> (2) Personality and effectiveness of his personal contacts.  | <u>O</u> (18) Development of informants and sources of information.   |
| <u>+</u> (3) Attitude (including dependability, cooperativeness, loyalty, enthusiasm, amenability and willingness to equitably share work load).  | <u>+</u> (19) Reporting ability: <ul style="list-style-type: none"> <li><u>-</u> (a) Investigative reports</li> <li><u>-</u> (b) Summary reports</li> <li><u>+</u> (c) Memos, letters, wires</li> </ul> (Consider: <u>+</u> conciseness; <u>+</u> clarity; <u>+</u> organization; <u>+</u> thoroughness; <u>+</u> accuracy; <u>+</u> adequacy and pertinency of leads; <u>+</u> administrative detail.)   |
| <u>+</u> (4) Physical fitness (including health, energy, stamina).  | <u>O</u> (20) Performance as a witness.   |
| <u>+</u> (5) Resourcefulness and ingenuity.   | <u>+</u> (21) Executive ability: <ul style="list-style-type: none"> <li><u>+</u> (a) Leadership</li> <li><u>+</u> (b) Ability to handle personnel</li> <li><u>+</u> (c) Planning</li> <li><u>+</u> (d) Making decisions</li> <li><u>+</u> (e) Assignment of work</li> <li><u>+</u> (f) Training subordinates</li> <li><u>+</u> (g) Devising procedures</li> <li><u>+</u> (h) Emotional stability</li> <li><u>+</u> (i) Promoting high morale</li> <li><u>+</u> (j) Getting results</li> </ul> |
| <u>+</u> (6) Forcefulness and aggressiveness as required.   | <u>-</u> (22) Ability on raids and dangerous assignments: <ul style="list-style-type: none"> <li><u>-</u> (a) As leader</li> <li><u>-</u> (b) As participant</li> </ul>   |
| <u>+</u> (7) Judgment, including common sense, ability to arrive at proper conclusions, ability to define objectives.   | <u>+</u> (23) Organizational interest, such as making of suggestions for improvement.   |
| <u>+</u> (8) Initiative and the taking of appropriate action on own responsibility.   | <u>+</u> (24) Ability to work under pressure.   |
| <u>+</u> (9) Planning ability and its application to the work.  | <u>-</u> (25) Miscellaneous. Specify and rate: <ul style="list-style-type: none"> <li><u>+</u> Dictation ability</li> </ul>   |
| <u>+</u> (10) Accuracy and attention to pertinent detail.   |   |
| <u>+</u> (11) Industry, including energetic, consistent application to duties.  |   |
| <u>E</u> (12) Productivity, including amount of acceptable work produced and rate of progress on or completion of assignments. Also consider adherence to deadlines unless failure to meet is attributable to causes beyond employee's control.   |   |
| <u>+</u> (13) Knowledge of duties, instructions, rules and regulations, including readiness of comprehension and "know how" of application.   |   |
| <u>O</u> (14) Technical or mechanical skills.   |   |
| <u>O</u> (15) Investigative ability and results: <ul style="list-style-type: none"> <li><u>-</u> (a) Internal security cases</li> <li><u>-</u> (b) Criminal or general investigative cases</li> <li><u>-</u> (c) Fugitive cases</li> <li><u>-</u> (d) Applicant cases</li> <li><u>-</u> (e) Accounting cases</li> </ul> |   |
| <u>O</u> (16) Physical surveillance ability.  |   |

- A. Specify general nature of assignment during most of rating period (such as security, criminal, applicant squad, or as Resident Agent, supervisor, instructor, etc.):

## Section Chief - Correspondence and Tours Section

- B. Specify employee's most noteworthy special talents (such as investigator, desk man, research, instructor, speaker):

## Desk Man - Lecturer

- C. (1) Is employee available for general assignment wherever needs of service require? Yes (If answer is not "yes," explain in narrative comments.)  
 (2) Is employee available for special assignment wherever needs of service require? Yes (If answer is not "yes," explain in narrative comments.)
- D. 1. Has employee had an abnormal sick leave record during rating period? No 2. Has employee used more sick leave (including annual leave or LWOP for illness) during rating period than the amount of sick leave earned during such period? No (If answer to either question is "Yes," explain in narrative comments.)
- E. Is employee qualified to operate a motor vehicle incidental to his official duties? ☒ Yes ☐ No  
 If answer is "yes," personnel file must reflect the following: (a) Has valid State or local operator's license for type vehicle he is to use. (b) Is physically fit to drive. (c) Past safe driving record OK or has passed Bureau road test.

ADJECTIVE RATING: EXCELLENT  
 Outstanding, Excellent, Satisfactory, Unsatisfactory

EMPLOYEE'S INITIALS

DM

DONALD C. MORRELL

Special Agent - Section Chief  
Correspondence and Tours Section  
Crime Records Division

Mr. Morrell has been a Section Chief in the Crime Records Division since March 14, 1960. He makes an outstanding appearance, is neat and obviously makes a good impression upon the general public and the personnel working under him. He supervises his Section in a firm and tight manner. His employees respect him. I particularly appreciate this Section Chief's loyalty and amenability to discipline. He has worked very hard in attempting to streamline the work of his Section and is constantly bringing forth new ideas which in turn inspire his personnel.

Due to necessary treatment for a dislocated vertebra, this employee has taken approximately 91 hours of sick leave during the rating period.

Mr. Morrell, during the rating period, has received one letter of commendation and one letter of censure. The commendation from the Director was for his graciously volunteering to work long hours in connection with the emergency occasioned by the assassination of the President. His letter of censure was received because of an error in outgoing signature mail. This should be no reflection upon his ability because he daily reviews and prepares large volumes of correspondence.

Mr. Morrell's memoranda are analytical and objective in scope. He continues to develop as a Section Chief and his interest and enthusiasm are unflagging.

I think it is well to note that in addition to his heavy responsibilities as a Section Chief, this employee also devotes considerable personal time in the activities of the Special Agents Mutual Benefit Association. He is responsible for making many suggestions which have greatly benefitted all FBI employees under this program.

I consider this Section Chief to be rated "Excellent" and that he well deserves this rating.

*gem*



## PART II SPECIFIC COMMENTS

1. Justification for Any Minus Ratings Given

N. A.

2. Experience and Ability as Inspector's Aide

Mr. Morrell is a qualified Inspector's Aide but was not given any inspection assignments during the rating period because of the absolute necessity to keep him at his desk.

3. Participation in Informant Programs

N. A.

4. Testifying Experience and Ability

Section Chief Morrell has had no opportunity to testify during the rating period, but he has had the opportunity to testify in the past and performed in an above-average manner.

5. Disciplinary Action

As reflected in Part I, this Section Chief received one letter of censure during the rating period.

6. Accounting Information

N. A.

7. Police Instruction

N. A. However, this Agent has a definite asset as a lecturer and can be used in this category at any time.

8. Sound Training

N. A.

9. Resident Agents

N. A.

10. Foreign Language Ability

N. A.

gem

11. Administrative Advancement

Is Agent (a) interested in (Yes X No \_\_\_\_), (b) completely available for (Yes X No \_\_\_\_), and (c) considered completely qualified at present for administrative advancement including experience, ability, personality, and appearance? (Yes X No \_\_\_\_). (d) If answer to (c) is "Yes," would you consider his qualifications very good \_\_\_\_, excellent X, outstanding \_\_\_\_.

(e) If answer to (c) is "No," does he have potential for future administrative advancement? (Yes \_\_\_\_ No \_\_\_\_).

*Jan*

REPORT OF MEDICAL EXAMINATION

F.B.I.

1. LAST NAME—FIRST NAME—MIDDLE NAME <u>MORRELL, DONALD CLARK</u>			2. GRADE AND COMPONENT OR POSITION <u>SA</u>		3. IDENTIFICATION NO.
4. HOME ADDRESS (Number, street or RFD, city or town, zone and State)			5. PURPOSE OF EXAMINATION <u>ANNUAL</u>		6. DATE OF EXAMINATION <u>3-24-64</u>
7. SEX <u>M</u>	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY _____ CIVILIAN _____		10. AGENCY	
11. ORGANIZATION UNIT		12. DATE OF BIRTH <u>6-13-18</u>			
13. PLACE OF BIRTH <u>N.Y.</u>		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN			
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS <u>NWMC</u>			16. OTHER INFORMATION		
17. RATING OR SPECIALTY			TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS

CLINICAL EVALUATION		ABNOR-
NOR-	(Check each item in appropriate column; enter "NE" if not evaluated.)	MAL
	18. HEAD, FACE, NECK, AND SCALP	
	19. NOSE	
	20. SINUSES	
	21. MOUTH AND THROAT	
	22. EARS—GENERAL (Int. & ext. canals) (Auditory acuity under items 70 and 71)	
	23. DRUMS (Perforation)	
	24. EYES—GENERAL (Visual acuity and refraction under items 69, 60 and 67)	
	25. OPHTHALMOSCOPIC	
	26. PUPILS (Equality and reaction)	
	27. OCULAR MOTILITY (Associated parallel movements, nystagmus)	
	28. LUNGS AND CHEST (Include breasts)	
	29. HEART (Thrust, size, rhythm, sounds)	
	30. VASCULAR SYSTEM (Varicosities, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Hemorrhoids, fistulae) (Prostate, if indicated)	
	33. ENDOCRINE SYSTEM	X
	34. G-U SYSTEM	
	35. UPPER EXTREMITIES (Strength, range of motion)	
	36. FEET	
	37. LOWER EXTREMITIES (Except feet) (Strength, range of motion)	
	38. SPINE, OTHER MUSCULOSKELETAL	X
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. SKIN, LYMPHATICS	X
	41. NEUROLOGIC (Equilibrium tests under item 72)	
	42. PSYCHIATRIC (Specify any personality deviation)	
	43. PELVIC (Females only) (Check how done)	
	<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES. (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

Prostate of normal size & consistency  
#33 - This agent complains of chronic Malaise. Was voluntarily going to give blood some time back & was told his hemoglobin was "low" - Advise CBC  
#38: Chronic cervical pain with stiffness in neck. See Orthopedic Consult  
#40: Mole in (R) axilla with Hx of trauma. See Dermatology Consult

REC-144

67-421042-161	
Searched	Numbered
Indexed	Filed

(Continue in item 73)

3/28

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)																	
O—Restorable teeth —Nonrestorable teeth																	
X—Missing teeth XXX—Replaced by dentures																	
(6 X 8)—Fixed bridge, brackets to include abutments																	
R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	L
I	X		X	X													E
G		31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	F
H	X													X			T

REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES

Type II  
Class I  
No defects noted

LABORATORY FINDINGS

45. URINALYSIS: A. SPECIFIC GRAVITY <u>1.027</u>		46. CHEST X-RAY (Place, date, film number and result) <u>21812-64</u>	
B. ALBUMIN <u>neg.</u>	D. MICROSCOPIC <u>neg.</u>	Heart & lungs are normal.	
C. SUGAR <u>neg.</u>	48. EKG <u>NWL</u>	49. BLOOD TYPE AND RH FACTOR	
47. SEROLOGY (Specify test used and result) <u>4/3 10/21/64 1964</u> <u>neg.</u>		50. OTHER TESTS Orthopedic - See consult. Hematology - See report Dermatology - See report.	

MEASUREMENTS AND OTHER FINDINGS												
51. HEIGHT 57"	52. WEIGHT 159#	53. COLOR HAIR Brown	54. COLOR EYES Blue	55. BUILD: (Check one) Slender Medium Heavy Obese	56. TEMPERATURE							
57. BLOOD PRESSURE (Arm at heart level)						58. PULSE (Arm at heart level)						
A. SITTING SYS. 100 DIAS. 66	B. RECUMBENT SYS. DIAS.	C. STANDING (3 min.) SYS. DIAS.	A. SITTING 68			B. AFTER EXERCISE			C. 2 MIN. AFTER		D. RECUMBENT	E. AFTER STANDING 3 MIN.
59. DISTANT VISION			60. REFRACTION			61. 175m NEAR VISION						
RIGHT 20/25	CORR. TO 20/20	BY lens	S.	OX	24/5			CORR. TO	BY			
LEFT 20/40	CORR. TO 20/20	BY lens	S.	OX	24/5			CORR. TO	BY			
62. HETEROPHORIA (Specify distance)												
ES°	EX°	R. H.	L. H.	PRISM DIV.	PRISM CONV. CT	PC		PD				
63. ACCOMMODATION			64. COLOR VISION (Test used and result) AOC 1940 18/18			65. DEPTH PERCEPTION (Test used and score)			UNCORRECTED			
RIGHT LEFT									CORRECTED			
66. FIELD OF VISION			67. NIGHT VISION (Test used and score)			68. RED LENS TEST			69. INTRAOCULAR TENSION			
70. HEARING			71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)			
RIGHT WV	15/15 SV	15/15	250 256	500 512	1000 1024	2000 2048	3000 2896	4000 4096	6000 6144	8000 8192		
LEFT WV	15/15 SV	15/15	RIGHT									
			LEFT									
73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY												

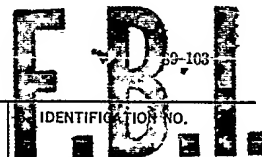
(See Reverse Side)  
CBC shows Hgb of 11.9g% Hct of 37vol% -  
WBC's within normal limits -

(Use additional sheets if necessary)  
74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)  
Slight anemia - Recommend private physician referral for treatment.  
#40 - V. Vulgaris - NCD  
#38 - Chronic Cervical pain - See orthopedic consultation

75. RECOMMENDATIONS - FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify) ① CBC ② Orthopedic Consult ③ Dermatology Consult						76. A. PHYSICAL PROFILE					
						P	U	L	H	E	S
77. EXAMINEE (Check) A. <input checked="" type="checkbox"/> IS QUALIFIED FOR B. <input type="checkbox"/> IS NOT QUALIFIED FOR						B. PHYSICAL CATEGORY					
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER						A	B	C	E		
79. TYPED OR PRINTED NAME OF PHYSICIAN Malcolm L. Petway, Lt. (MC) USNR - Bethesda, Maryland						SIGNATURE M. Petway MD					
80. TYPED OR PRINTED NAME OF PHYSICIAN						SIGNATURE					
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)						SIGNATURE					
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY						SIGNATURE					
						NUMBER OF ATTACHED SHEETS					

REPORT OF MEDICAL HISTORY

THIS INFORMATION IS FOR OFFICIAL USE ONLY AND WILL NOT BE RELEASED TO UNAUTHORIZED PERSONS



1. LAST NAME—FIRST NAME—MIDDLE NAME

MORRELL DONALD CLARK

2. GRADE AND COMPONENT OR POSITION

FBI

IDENTIFICATION NO.

4. HOME ADDRESS (Number, street or RFD, city or town, zone and State)

5516 CHARLCOTE ROAD, BETHESDA, MARYLAND

5. PURPOSE OF EXAMINATION

FBI - ANNUAL

6. DATE OF EXAMINATION

3-24-64

7. SEX

M

8. RACE

W

9. TOTAL YEARS GOVERNMENT SERVICE

MILITARY

CIVILIAN

10. AGENCY

FBI

11. ORGANIZATION UNIT

12. DATE OF BIRTH

JUNE 13, 1918

13. PLACE OF BIRTH

BROOKLYN, NEW YORK

14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN

ELIZABETH H. MORRELL - WIFE  
(SAME AS ABOVE)

15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS

16. OTHER INFORMATION

17. STATEMENT OF EXAMINEE'S PRESENT HEALTH IN OWN WORDS. (Follow by description of past history, if complaint exists)

GOOD — AFTER WORK TENDENCY TO TIRE QUICKLY. HAVE VERY FREQUENT STIFFNESS  
AT BASE OF BACK OF NECK AND  
ACROSS TOP OF BACK

18. FAMILY HISTORY

RELATION	AGE	STATE OF HEALTH	IF DEAD, CAUSE OF DEATH	AGE AT DEATH	YES	NO	(Check each item)	RELATION(S)
FATHER		Deceased	Coronary Occlusion	61			HAD TUBERCULOSIS	
MOTHER	72	Good					HAD SYPHILIS	
SPOUSE	45	Good					HAD DIABETES	
	49	Good					HAD CANCER	
BROTHERS							HAD KIDNEY TROUBLE	
AND							HAD HEART TROUBLE	
SISTERS							HAD STOMACH TROUBLE	
							HAD RHEUMATISM (Arthritis)	
CHILDREN		Good					HAD ASTHMA, HAY FEVER, HIVES	
		Good					HAD EPILEPSY (Fits)	
							COMMITTED SUICIDE	
							BEEN INSANE	

20. HAVE YOU EVER HAD OR HAVE YOU NOW (Place check at left of each item)

YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)
<input checked="" type="checkbox"/>		SCARLET FEVER, <del>ERYSIPLES</del>	<input checked="" type="checkbox"/>		GOITER	<input checked="" type="checkbox"/>		TUMOR, GROWTH, CYST, CANCER	<input checked="" type="checkbox"/>		"TRICK" OR LOCKED KNEE
<input checked="" type="checkbox"/>		DIPHTHERIA	<input checked="" type="checkbox"/>		TUBERCULOSIS	<input checked="" type="checkbox"/>		RUPTURE	<input checked="" type="checkbox"/>		FOOT TROUBLE
<input checked="" type="checkbox"/>		RHEUMATIC FEVER	<input checked="" type="checkbox"/>		SOAKING SWEATS (Night sweats)	<input checked="" type="checkbox"/>		APPENDICITIS	<input checked="" type="checkbox"/>		NEURITIS
<input checked="" type="checkbox"/>		SWOLLEN OR PAINFUL JOINTS	<input checked="" type="checkbox"/>		ASTHMA	<input checked="" type="checkbox"/>		PILES OR RECTAL DISEASE	<input checked="" type="checkbox"/>		PARALYSIS (Inc. infantile)
<input checked="" type="checkbox"/>		MUMPS	<input checked="" type="checkbox"/>		SHORTNESS OF BREATH	<input checked="" type="checkbox"/>		FREQUENT OR PAINFUL URINATION	<input checked="" type="checkbox"/>		EPILEPSY OR FITS
<input checked="" type="checkbox"/>		WHOOPING COUGH	<input checked="" type="checkbox"/>		PAIN OR PRESSURE IN CHEST	<input checked="" type="checkbox"/>		KIDNEY STONE OR BLOOD IN URINE	<input checked="" type="checkbox"/>		CAR, TRAIN, SEA, OR AIR SICKNESS
<input checked="" type="checkbox"/>		FREQUENT OR SEVERE HEADACHE	<input checked="" type="checkbox"/>		CHRONIC COUGH	<input checked="" type="checkbox"/>		SUGAR OR ALBUMIN IN URINE	<input checked="" type="checkbox"/>		FREQUENT TROUBLE SLEEPING
<input checked="" type="checkbox"/>		DIZZINESS OR FAINTING SPELLS	<input checked="" type="checkbox"/>		PALPITATION OR POUNDING HEART	<input checked="" type="checkbox"/>		BOILS	<input checked="" type="checkbox"/>		FREQUENT OR TERRIFYING NIGHTMARES
<input checked="" type="checkbox"/>		EYE TROUBLE	<input checked="" type="checkbox"/>		HIGH OR LOW BLOOD PRESSURE	<input checked="" type="checkbox"/>		VENEREAL DISEASE	<input checked="" type="checkbox"/>		DEPRESSION OR EXCESSIVE WORRY
<input checked="" type="checkbox"/>		EAR, NOSE OR THROAT TROUBLE	<input checked="" type="checkbox"/>		CRAMPS IN YOUR LEGS	<input checked="" type="checkbox"/>		RECENT GAIN OR LOSS OF WEIGHT	<input checked="" type="checkbox"/>		LOSS OF MEMORY OR AMNESIA
<input checked="" type="checkbox"/>		RUNNING EARS	<input checked="" type="checkbox"/>		FREQUENT INDIGESTION	<input checked="" type="checkbox"/>		ARTHRITIS OR RHEUMATISM	<input checked="" type="checkbox"/>		BED WETTING
<input checked="" type="checkbox"/>		CHRONIC OR FREQUENT COLDS	<input checked="" type="checkbox"/>		STOMACH, LIVER OR INTESTINAL TROUBLE	<input checked="" type="checkbox"/>		BONE, JOINT, OR OTHER DEFORMITY	<input checked="" type="checkbox"/>		NERVOUS TROUBLE OF ANY SORT
<input checked="" type="checkbox"/>		SEVERE TOOTH OR GUM TROUBLE	<input checked="" type="checkbox"/>		GALL BLADDER TROUBLE OR GALL STONES	<input checked="" type="checkbox"/>		LAMENESS	<input checked="" type="checkbox"/>		ANY DRUG OR NARCOTIC HABIT
<input checked="" type="checkbox"/>		SINUSITIS	<input checked="" type="checkbox"/>		JAUNDICE	<input checked="" type="checkbox"/>		LOSS OF ARM, LEG, FINGER, OR TOE	<input checked="" type="checkbox"/>		EXCESSIVE DRINKING HABIT
<input checked="" type="checkbox"/>		HAY FEVER	<input checked="" type="checkbox"/>		ANY REACTION TO SERUM, DRUG OR MEDICINE	<input checked="" type="checkbox"/>		PAINFUL OR "TRICK" SHOULDER OR ELBOW	<input checked="" type="checkbox"/>		HOMOSEXUAL TENDENCIES

21. HAVE YOU EVER (Check each item)

<input checked="" type="checkbox"/>	WORN GLASSES	<input checked="" type="checkbox"/>	ATTEMPTED SUICIDE
<input checked="" type="checkbox"/>	WORN AN ARTIFICIAL EYE	<input checked="" type="checkbox"/>	BEEN A SLEEP WALKER
<input checked="" type="checkbox"/>	WORN HEARING AIDS	<input checked="" type="checkbox"/>	LIVED WITH ANYONE WHO HAD TUBERCULOSIS
<input checked="" type="checkbox"/>	STUTTERED OR STAMMERED	<input checked="" type="checkbox"/>	COUGHED UP BLOOD
<input checked="" type="checkbox"/>	WORN A BRACE OR BACK SUPPORT	<input checked="" type="checkbox"/>	BLED EXCESSIVELY AFTER INJURY OR TOOTH EXTRACTION

22. FEMALES ONLY: A. HAVE YOU EVER—

<input type="checkbox"/>	BEEN PREGNANT	<input type="checkbox"/>	AGE AT ONSET OF MENSTRUATION
<input type="checkbox"/>	HAD A VAGINAL DISCHARGE	<input type="checkbox"/>	INTERVAL BETWEEN PERIODS
<input type="checkbox"/>	BEEN TREATED FOR A FEMALE DISORDER	<input type="checkbox"/>	DURATION OF PERIODS
<input type="checkbox"/>	HAD PAINFUL MENSTRUATION	<input type="checkbox"/>	DATE OF LAST PERIOD
<input type="checkbox"/>	HAD IRREGULAR MENSTRUATION	QUANTITY: <input type="checkbox"/> NORMAL <input type="checkbox"/> EXCESSIVE <input type="checkbox"/> SCANTY	

23. HOW MANY JOBS HAVE YOU HAD IN THE PAST THREE YEARS?

ONE

24. WHAT IS THE LONGEST PERIOD YOU HELD ANY OF THESE JOBS?

MONTHS 17 years

25. WHAT IS YOUR USUAL OCCUPATION?

FBI Agent

26. ARE YOU (check one)

☒ RIGHT HANDED ☐ LEFT HANDED

CLOSURE

67-421042-161 gum

YES	NO	CHECK EACH ITEM YES OR NO. EVERY ITEM CHECKED "YES" MUST BE FULLY EXPLAINED IN BLANK SPACE ON RIGHT
	<input checked="" type="checkbox"/>	27. HAVE YOU BEEN UNABLE TO HOLD A JOB BECAUSE OF: A. SENSITIVITY TO CHEMICALS, DUST, SUNLIGHT, ETC.
	<input checked="" type="checkbox"/>	B. INABILITY TO PERFORM CERTAIN MOTIONS
	<input checked="" type="checkbox"/>	C. INABILITY TO ASSUME CERTAIN POSITIONS
	<input checked="" type="checkbox"/>	D. OTHER MEDICAL REASONS (If yes, give reasons)
	<input checked="" type="checkbox"/>	28. HAVE YOU EVER WORKED WITH RADIOACTIVE SUBSTANCE?
	<input checked="" type="checkbox"/>	29. DID YOU HAVE DIFFICULTY WITH SCHOOL STUDIES OR TEACHERS? (If yes, give details)
	<input checked="" type="checkbox"/>	30. HAVE YOU EVER BEEN REFUSED EMPLOYMENT BECAUSE OF YOUR HEALTH? (If yes, state reason and give details)
	<input checked="" type="checkbox"/>	31. HAVE YOU EVER BEEN DENIED LIFE INSURANCE? (If yes, state reason and give details)
<input checked="" type="checkbox"/>		32. HAVE YOU HAD, OR HAVE YOU BEEN ADVISED TO HAVE, ANY OPERATIONS? (If yes, describe and give age at which occurred) <i>T+A age 5 Deviated septum age 44 (Bethesda Naval Hospital)</i>
	<input checked="" type="checkbox"/>	33. HAVE YOU EVER BEEN A PATIENT (committed or voluntary) IN A MENTAL HOSPITAL OR SANATORIUM? (If yes, specify when, where, why, and name of doctor, and complete address of hospital or clinic)
	<input checked="" type="checkbox"/>	34. HAVE YOU EVER HAD ANY ILLNESS OR INJURY OTHER THAN THOSE ALREADY NOTED? (If yes, specify when, where, and give details)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	35. HAVE YOU CONSULTED OR BEEN TREATED BY CLINICS, PHYSICIANS, HEALERS, OR OTHER PRACTITIONERS WITHIN THE PAST 5 YEARS? (If yes, give complete address of doctor, hospital, clinic, and details) <i>Yes - Osteopath - 1963 - dislocated vertebra in sacro-lumbar region.</i>
	<input checked="" type="checkbox"/>	36. HAVE YOU TREATED YOURSELF FOR ILLNESSES OTHER THAN MINOR COLDS? (If yes, which illnesses)
	<input checked="" type="checkbox"/>	37. HAVE YOU EVER BEEN REJECTED FOR MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date and reason for rejection)
	<input checked="" type="checkbox"/>	38. HAVE YOU EVER BEEN DISCHARGED FROM MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date, reason, and type of discharge: whether honorable, other than honorable, for unfitness or unsuitability)
	<input checked="" type="checkbox"/>	39. HAVE YOU EVER RECEIVED, IS THERE PENDING, HAVE YOU APPLIED FOR, OR DO YOU INTEND TO APPLY FOR PENSION OR COMPENSATION FOR EXISTING DISABILITY? (If yes, specify what kind, granted by whom, and what amount, when, why)

I CERTIFY THAT I HAVE REVIEWED THE FOREGOING INFORMATION SUPPLIED BY ME AND THAT IT IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.  
I AUTHORIZE ANY OF THE DOCTORS, HOSPITALS, OR CLINICS MENTIONED ABOVE TO FURNISH THE GOVERNMENT A COMPLETE TRANSCRIPT OF MY MEDICAL RECORD FOR PURPOSES OF PROCESSING MY APPLICATION FOR THIS EMPLOYMENT OR SERVICE.

TYPED OR PRINTED NAME OF EXAMINEE

**DONALD CLARK MORRELL**

SIGNATURE

*Donald Clark Morrell*

40. PHYSICIAN'S SUMMARY AND ELABORATION OF ALL PERTINENT DATA (Physician shall comment on all positive answers in items 20 thru 39)

- (1) Neck stiffness -
- (2) Persistent Malaise -
- (3) Mole in (R) axilla - Irritation.

TYPED OR PRINTED NAME OF PHYSICIAN OR EXAM

**Malcolm L. Perway, Lt. (MC) USNR**

DATE

**MAR 24 1964**

SIGNATURE

*M L Perway*

NUMBER OF ATTACHED SHEETS

**131**

CLINICAL RECORD

CONSULTATION SHEET

REQUEST		
TO: ORTHOPEDICS CONSULTATION	FROM: (Requesting ward, unit, or activity) STAFF CLINIC	DATE OF REQUEST 3/24/64

REASON FOR REQUEST (Complaints and findings)

45 year old FBI special agent, who is currently in the process of physical exam comes in with complaint of intermittent neck stiffness and pain within the paracervical area extending caudally to the upper thoracic area in the midline. Please evaluate. Thank you.

PROVISIONAL DIAGNOSIS

DOCTOR'S SIGNATURE <i>[Signature]</i>	APPROVED	PLACE OF CONSULTATION <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ON CALL	<input type="checkbox"/> EMERGENCY <input type="checkbox"/> ROUTINE
---------------------------------------	----------	--	--

Malcolm Putney, Lt. (MC) USNR  
4-6-64 @ 10:00

CONSULTATION REPORT

Complains of recurring stiff neck hurting for a day or so, responds to massage. Works on a desk ~~most~~ all day. Complaints more pronounced in the evening.

Phys ex is remarkable  
no neurological findings.

X-ray shows some spurring of C5-C6 foramen  
bilaterally.

*Thank you*  
*[Signature]*

(Continued on reverse side)

SIGNATURE AND TITLE	DATE	IDENTIFICATION NO.	ORGANIZATION
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle, grade, date: hospital or medical facility) (3-54-95) MORRELL, DONALD CLARK FBI SPECIAL AGENT		REGISTER NO. 3-1-25	STAFF CLINIC

CONSULTATION SHEET  
Standard Form 513  
513-104-02

67-951042-161

*[Signature]*

CLINICAL RECORD

CONSULTATION SHEET

REQUEST

TO: <b>DERMATOLOGY CONSULTATION</b>	FROM: (Requesting ward, unit, or activity) <b>STAFF CLINIC</b>	DATE OF REQUEST <b>3/24/64</b>
--	---	-----------------------------------

REASON FOR REQUEST (Complaints and findings)

45 year old special agent for the FBI who is currently in process of annual physical examination complains of "tearing" of long present lesion in the right axilla. Please advise. Thank you very much.

PROVISIONAL DIAGNOSIS

DOCTOR'S SIGNATURE <i>Malcolm L. Perway</i>	APPROVED	PLACE OF CONSULTATION <input type="checkbox"/> BEDSIDE <input type="checkbox"/> ON CALL	<input type="checkbox"/> EMERGENCY <input type="checkbox"/> ROUTINE
Malcolm L. Perway, Lt. Col., USNR CONSULTATION REPORT			

3-27-64 @ 1:30

I feel (This is a V. Vulgaris  
- Removed by D.C. for diagnostic  
purposes - specimen to be -  
Ander

(Continued on reverse side)

SIGNATURE AND TITLE	DATE	IDENTIFICATION NO.	ORGANIZATION
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility) <b>(3-54-95)</b>		REGISTER NO.	<b>STAFF CLINIC</b>

MORRELL, DONALD CLARK

FBI SPECIAL AGENT

CONSULTATION SHEET  
Standard Form 513  
513-104-02

67-481042-161  
8/2/77



(3-54-95)

MORRELL, DONALD CLARK

SPECIAL AGENT FBI

(7132)

REGISTER OR UNIT NO.	STATE CLINIC	ED PATIENT
REQUIRED BY	STAFF CLINIC	AMBULATORY
DATE	LT MAUSNE	DATE COLLECTED
CLINICAL DATA		
Malaise.		

PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME

<input checked="" type="checkbox"/> W.B.C.	5,500	<input type="checkbox"/> R.B.C.	
<input checked="" type="checkbox"/> DIFFERENTIAL COUNT		<input checked="" type="checkbox"/> HEMATOCRIT	37
NEUTROPHILES	49	<input checked="" type="checkbox"/> HEMOGLOBIN	11.9
BLASTS		BLEEDING TIME	
MYELOCYTES		COAGULATION TIME	
BANDS	2	BLOOD MORPHOLOGY; REMARKS	
LYMPHOCYTES	48		
MONOCYTES			
EOSINOPHILES	100%		
BASOPHILES			
PLATELETS			
SEDIMENTATION RATE			
C.S.R.			

DATE OF REPORT	SIGNATURE (Specify Lab. if not part of requesting facility)
MAR 24 1964	
NAME OF MEDICAL FACILITY	

Standard Form 514-B—Rev. June 1959.  
Bureau of the Budget Circular A-32

GPO c53-16-56274-6

HEMATOLOGY

67-421040-161

**Attachment to Standard Form 88, Report of Medical Examination  
For Information and Guidance of Medical Examiner**

Name of Examinee MORRELL, DONALD CLARK  
(Type or print) Last First Middle

The following portions of the attached examination report form need not be completed:

2	14	68
3	17	69
4	62	72
9	65	76
11	67	

46. Is necessary unless facilities for affording same are not readily available.
48. Not required unless examinee is over 35 years of age or examination indicates such is desirable.
49. Is necessary unless facilities for affording same are not readily available.
71. Audiometer examinations should be afforded whenever possible for all Special Agent applicants and Special Agents. Applicants for the Special Agent position will not be accepted if the hearing loss exceeds a 15 decibel average in each ear in the conversational speech range (500, 1000, 2000 cycles).

**For All Examinees, Whether Clerical or Special Agent Applicants or Employees:**

*The medical examiner should answer the following question:*

Examinee ☒ is ☐ is not qualified for strenuous physical exertion.

**To be Answered in the Case of All Male Employees and Male Applicants:**

1. Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

2. Does examinee have any defects prohibiting safe operation of motor vehicles?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

3. For safe driving of motor vehicles, Civil Service Commission requires distant vision must test at least 20/40 in one eye and 20/100 in the other, corrected or uncorrected. Should examinee wear corrective glasses while operating a motor vehicle? ☒ Yes ☒ No  
If recommendation is based on a factor other than above standard, indicate basis \_\_\_\_\_

67-42164-161

gum

Desirable Weight Ranges for Males

Height	Small Frame	Medium Frame	Large Frame
5' 4"	117 - 125	123 - 135	131 - 148
5' 5"	120 - 129	126 - 139	134 - 152
5' 6"	124 - 133	130 - 143	138 - 157
5' 7"	128 - 137	134 - 148	143 - 162
5' 8"	132 - 141	138 - 152	147 - 166
5' 9"	136 - 146	142 - 156	151 - 170
5' 10"	140 - 150	146 - 161	155 - 175
5' 11"	144 - 154	150 - 166	160 - 180
6'	148 - 158	154 - 171	164 - 185
6' 1"	152 - 163	158 - 176	169 - 190
6' 2"	156 - 167	163 - 181	174 - 195
6' 3"	160 - 171	168 - 186	178 - 200
6' 4"	169 - 180	178 - 196	188 - 210
6' 5"	174 - 185	182 - 202	192 - 216

REC'D - 1000 N. DIV.  
FBI  
APR 23 11 13 AM '64

4. Examinee's frame is ☐ small ☐ medium ☒ large

5. Considering above weight table, the examinee's frame, and other individual physical characteristics, I consider his present weight ☒ Satisfactory ☐ Excessive ☐ Deficient

6. Under proper medical supervision, examinee should ☐ lose \_\_\_\_\_ pounds ☐ gain \_\_\_\_\_ pounds

Consults: Dermatology, CBC, Orthopedics.

Remarks:

Recommend: Referral to private physician for treatment of slight anemia.

Qualified 4-20-64  
M. L. Perway MD.  
Lt (MC) USNR

M. L. Perway MD  
Malcolm L. Perway, Lt. (MC) USNR

(Signature of Medical Examiner)

MAR 24 1964

(Date)



**UNITED STATES DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION**

*In Reply, Please Refer to  
File No.*

Director  
Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C. 20535

Dear Sir:

For inclusion in the fund to be paid to the designated beneficiary of any Special Agent of the FBI who has previously contributed to this fund and who dies from any cause except self-destruction while employed as a Special Agent, I am forwarding herewith (by Check - Money Order) the sum of \$10, payable to S.A.I.F., to be included in said fund. Payment will be made for death by self-destruction after the Agent has been a member of the fund for a continuous period of two years. It is understood and agreed that the sum tendered herewith is a voluntary, gratuitous contribution to said fund which I understand is to be administered in the following manner.

The Director of the FBI will appoint a committee which shall consider all matters pertaining to the acquisition, safe keeping and expending of said fund, which committee will recommend appropriate action to the Director in pertinent matters. The Assistant Director of the Administrative Division of the FBI shall receive all contributions and account for same to the Director. Upon the death of any Special Agent who is a member of said fund the appointed committee will consider the case and submit a recommendation to the Director as to its conclusions. Appropriate instructions will then be issued to the Assistant Director of the Administrative Division, directing him to pay to the designated beneficiary the sum of \$10,000. The liability of the fund shall not under any circumstances exceed the amount of monies in the fund at the time any liability shall occur.

**EXECUTE IN DUPLICATE AND SUBMIT BOTH COPIES TO THE BUREAU**

Official Bureau Name (please type or print)	Date	Office of Assignment (or SOG Division)
SA Donald C. Morrell	5-15-64	Crime Records Division

The following person is designated as my beneficiary for Special Agents Insurance Fund:

Name (primary beneficiary; use given first name if female)	Relationship
Elizabeth H. Morrell	Wife
Address	
5516 Charlcoate Road, Bethesda, Maryland	
Name (contingent beneficiary, if desired; use given first name if female)	Relationship
	Son and daughter
Address	

The following person is designated as my beneficiary under the Chas. S. Ross Fund providing \$1500 death benefit to beneficiary of agents killed in the line of duty, other than travel accidents.

Name (primary beneficiary; use given first name if female)	Relationship
Elizabeth H. Morrell	Wife
Address	
5516 Charlcoate Road, Bethesda, Maryland	
Name (contingent beneficiary, if desired; use given first name if female)	Relationship
	Son and daughter
Address	

Very truly yours,

*Donald C. Morrell*  
Special Agent

Payment toward  
Special Agents Insurance Fund

5-15-64

DEDE, Director

4 JUN 17 1964

3-ecd

RECEIPT FOR GOVERNMENT PROPERTY  
FEDERAL BUREAU OF INVESTIGATION  
UNITED STATES DEPARTMENT OF JUSTICE

7-23-64

I certify that I have received the following Government property for official use:

~~XXXXXX~~  
returned

New Commission Card with case # 4397

RETURNED:

Old Commission Card with case # 4397

READ

The Government property which you hereby acknowledge is charged to you and you are responsible for taking care of it and returning it when its use has been completed. DO NOT MARK OR WRITE ON IT OR MUTILATE IT IN ANY WAY.

NOT RECORDED

7 JUL 28 1964

Very truly yours, FILE  
3/

(Written  
Signature)

*Donald C. Morrell*

(Typed  
Signature)

Donald C. Morrell

UNITED STATES GOVERNMENT

*Memorandum*

TO : Director, FBI

DATE: 6-25-64

FROM : ~~XXX~~ C. D. DeLoach *CD*

Attention: Personnel Section

SUBJECT: SA DONALD C. MORRELL  
CORRESPONDENCE AND TOURS SECTION  
CRIME RECORDS DIVISION☐ Remylet \_\_\_\_\_  
☐ ReBulet \_\_\_\_\_☒ Re physical examination 3-24-64 \_\_\_\_\_  
☐ Dental work was completed on \_\_\_\_\_  
☐ Vision has been corrected to \_\_\_\_\_ Employee specifically instructed\_\_\_\_\_ by \_\_\_\_\_ that he can operate a Bureau car  
(date) (name of person giving instruction)  
only when wearing the necessary glasses.☐ Results of ☐ chest X ray ☐ patch test ☐ urinalysis ☐ serology were negative.  
☐ Enclosed physician's statement indicates he is qualified for strenuous physical exertion and use of firearms.  
☐ Enclosed are ☐ paid ☐ unpaid medical bills.  
☐ Attached are Bureau of Employees' Compensation forms \_\_\_\_\_☐ Physical examination reports are enclosed.  
☐ Employee is scheduled for physical examination on \_\_\_\_\_  
☐ Physical examination report has been reviewed and initialed.  
☐ Employee returned to active duty \_\_\_\_\_  
☒ Employee's physical condition is satisfactory \_\_\_\_\_  
☐ UACB he is being removed from limited duty.  
☐ UACB he is being placed on limited duty.

## Remarks:

At the suggestion of the examining physicians at Bethesda Naval Hospital, SA Morrell underwent extensive tests with his private physician, James Nolan, Washington Clinic, Washington, D. C. Fearing ulcers or internal bleeding he had extensive examinations and X-rays of the gastrointestinal tract and colon done which were negative. Extensive blood tests were made with the final diagnosis of a blood iron deficiency. Mr. Morrell is now taking a ferrous iron preparation for the treatment of iron deficiency anemia.

46

*Will follow  
6-26-64**3/100*

UNITED STATES GOVERNMENT

# Memorandum

TO : MR. CALLAHAN

DATE: 10-23-64

FROM : C. R. DAVIDSON *CRD*

SUBJECT: SA DONALD C. MORRELL  
Section Chief; Correspondence and  
Tours Section, Crime Records  
Division  
Entered on Duty 8-18-47  
GS-15, \$18,170

SA W. HAMMOND FLOYD  
Supervisor - Subversive Control Section  
Domestic Intelligence Division  
Entered on Duty 4-19-48  
GS-14, \$15,640

REQUEST FOR PHOTOGRAPH WITH THE DIRECTOR  
COMMEMORATING ADMISSION TO SUPREME COURT BAR

Arrangements have been made for SAs Donald C. Morrell and W. Hammond Floyd to be admitted to practice in the United States Supreme Court, Monday, 11-16-64. These agents have requested to meet the Director and have a photograph made commemorating this event, commitments of the Director permitting. With the agents will be their wives and SA Morrell's mother.

The services of these agents are satisfactory.

The admission ceremony takes place at 10:00 a.m., Monday, 11-16-64, and SAs Morrell and Floyd will arrive at the Justice Building by 11:30 a.m.

## RECOMMENDATIONS:

1. In the event the Director is able to honor this request he may desire to indicate a time for taking of a photograph with SA Morrell and SA Floyd after 11:30 a.m., Monday, 11-16-64.

2. If approved, SAs Morrell and Floyd will be notified of time and file briefs and summaries will be prepared.

- 1 - Miss Holmes
  - 1 - Mr. DeLoach
  - 1 - Mr. Hereford
  - 1 - Personnel File of SA W. Hammond Floyd
- JBA:pmd (6)

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Evans \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

REC-133

67-421047-162  
Searched \_\_\_\_\_ Numbered \_\_\_\_\_  
1 OCT 29 1964

*at 11.30 a.m. Nov. 16*

*advised 10/26*  
*10/23*  
*10/23*  
*10/23*

## FEDERAL BUREAU OF INVESTIGATION

9/28 1964

Director  
 Mr. Tolson  
 Mr. Belmont, 5736  
 Mr. Mohr, 5525  
 Mr. Hyde, 5525  
 Mr. Callahan, 5515  
 Mr. Casper, 5234  
 Mr. Conrad, 7621  
 Mr. DeLoach, 5640  
 Mr. Evans, 1742  
 Mr. Gale, 5256  
 Mr. Rosen, 5706  
 Mr. Sullivan, 807 RB  
 Mr. Tavel, 7746  
 Mr. Trotter, 4130 IB

Miss Gandy, 5633  
 Mr. Clayton, 5744  
 Mrs. Brown, 5744

Mr. Kemper, 5632  
 Mr. Leinbaugh, 5634  
 Mr. Wick, 5640  
 [redacted] 5640

Mr. M. A. Jones, 4264  
 Miss Osborne, 4264  
 Mr. Fulton, 5625  
 Mr. Daunt, 320 OPO  
 Mr. Cotter, 5230  
 Mr. McGowan, 2712  
 Mrs. McNeely, 6207 IB  
 Mr. C. O. Smith, B-110  
 [redacted] 4509

File Review, 1319 IB  
 Mail Room, 5531  
 Reading Room, 5533  
 Records Branch, 7712  
 Serialize Special  
 and return  
 File Special  
 Service Unit, 6524  
 Telephone Room 5633  
 Room 4268, Speech Room  
 Room 4248, Library

Mr. [redacted]  
 Mrs. [redacted]  
 [redacted]  
 Room [redacted] 4539

## CORRESPONDENCE AND TOURS SECTION

Mr. Morrell, 4718-2153  
 Mr. Malmfeldt, 4718-2153  
 [redacted] 4724-481  
 [redacted] 4724-879  
 [redacted] 4714-432  
 Mr. Meincke, 4714-416  
 Mr. Perrine, 4716-430  
 Mr. Stefansson, 4716-438  
 Mr. Williams, 4730-2436  
 Mr. Johnson, 4730-2467  
 [redacted] 4736-622  
 [redacted] 4728-429  
 Miss West, 4736-2213  
 Mrs. Huff, 4718-2153  
 [redacted] 4718-2153  
 [redacted] 4726-481  
 [redacted] 4726-879  
 [redacted] 4726-879

Mr. Stanleton, 1734-447  
 [redacted] 1734-447  
 Mr. Cumming, 1734-447  
 [redacted] 1734-447  
 [redacted] 1734-447  
 [redacted] 4738-414  
 [redacted] 4708-658  
 [redacted] 4718-2153  
 [redacted] 4732-413

Please see me  
 Please call me  
 Per your request  
 Per call  
 For your information  
 Appropriate Action  
 Please note & return  
 Room 4734  
 Room 4736

Physical condition good. Diagnosis  
 blood-iron deficiency. Am taking  
 pills (FERGERIN).

D. C. MORRELL  
 RM. 4718 EXT. 2153

Correspondence and Tours Section

b6  
b7C

For Personnel file  
 of D. C. Morrell.

wfk

No further  
 action necessary  
 wfk

3/10/64



UNITED STATES GOVERNMENT

# Memorandum

TO : Mr. Callahan

DATE: 11-13-64

FROM : C. R. Davidson

SUBJECT: SA DONALD C. MORRELL  
Section Chief  
Correspondence and Tours Section  
Crime Records Division  
Veteran  
EOD 8-18-47; GS-15, \$18,170

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Evans \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

The following is a brief summary of SA Morrell's record for the Director's use. On 11-16-64 he will be admitted to practice in the United States Supreme Court and requested a photograph with the Director commemorating this event. He will be accompanied by his wife and mother. The Director has indicated that he will honor this request.

Mr. Morrell entered on duty as a Special Agent on 8-18-47 and served in three field offices prior to being transferred to the Seat of Government, 3-16-53. He was assigned to the Administrative Division and on 2-11-59 was designated Unit Chief of the Applicant and Placement Unit. On 3-14-60 he was transferred to the Crime Records Division as Section Chief of the Correspondence and Tours Section, where he is presently assigned in Grade GS-15, \$18,170 per annum.

The Director last saw SA Morrell on 3-11-60 who had just been designated Section Chief of the Correspondence and Tours Section of the Crime Records Division. Mr. Morrell called to express his appreciation for the designation and the challenge which he believed his assignment offered him. The Director told Mr. Morrell that as Mr. Morrell probably knew, the Director had not been entirely satisfied with the manner in which correspondence had been coming through from the Crime Records Division nor as to the entire handling of tours, and it was his responsibility to "dig" into the section and see there was a thorough streamlining in all respects.

Since SA Morrell last saw the Director, 3-11-60, he has been CENSURED nine times, the last being 3-31-64 for an erroneous statement in an official communication prepared by him. During this same period he has been COMMENDED on seven occasions, the last being 12-4-63 along with the personnel who so graciously volunteered to work on 11-25-63, in connection with the emergency occasioned by the assassination of the President. All but one of the above-mentioned censures resulted from errors or delinquencies in correspondence prepared by him or under his supervision.

On 3-31-64 he was rated EXCELLENT and comments indicated he was Section Chief in the Crime Records Division. He supervised his section in a firm and tight manner and his employees respected him. He had worked very hard in attempting to streamline the work of his section and was constantly bringing forth new ideas which in turn inspired his personnel.

FDH:jnm (2)  
Permanent Brief Attached

(OVER)

RE: SA DONALD C. MORRELL  
Crime Records Division

In addition to his heavy responsibilities, he also devoted considerable personal time in the activities of the Special Agents Mutual Benefit Association. He was interested in, available for and considered to have excellent qualifications for administrative advancement.

SA Morrell is presently serving in his office of preference, having listed Seat of Government, Seattle and Portland in February, 1962. His daily average overtime is considered satisfactory.

His son, [REDACTED] was a summer employee for the years 1960 and 1961. He served as a File Clerk in the Washington Field Office and his services were satisfactory.

b6  
b7C

*and*

December 11, 1964

Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

DEC 11 12 43 PM '64  
REC'D - READING ROOM  
FBI

Dear Mr. Morrell:

I am pleased to commend you and, through you, the personnel in the Correspondence and Tours Section for the splendid manner in which an extremely high volume of work received during the past three weeks was handled.

Everyone was very loyal in voluntarily working many hours of overtime in order to be of assistance and performed in a most efficient, skillful and enthusiastic fashion. As a result of your effective leadership and the combined efforts of those who helped, this heavy work load was expeditiously completed. I want to thank you and ask that you convey my sincere appreciation to those who participated.

Sincerely yours,  
J. Edgar Hoover

1 - Mr. DeLoach (Personal Attention)

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Evans \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

1 - [Redacted] (Sent Direct)

CTP

(55)

67-421042

DEC 13 1964

XEROX

Based on memo DeLoach to Mohr, 12-9-64 re: "Volume of Correspondence and Tours Section." Copies prepared and attached for placing in files of: (Over)

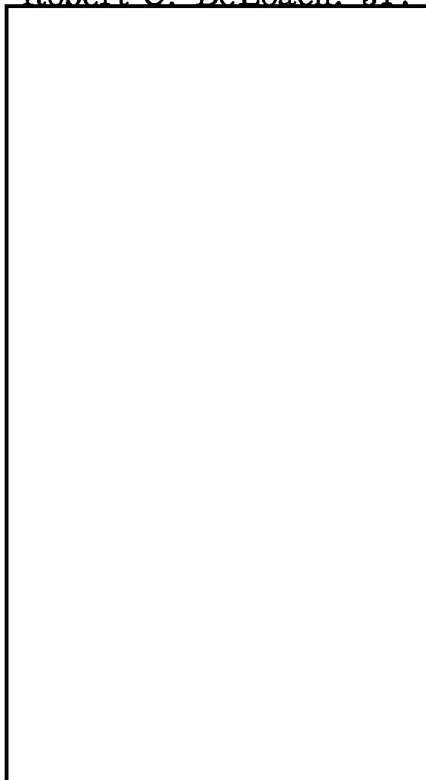
MAIL ROOM ☐ TELETYPE UNIT ☐

b6  
b7c

Mr. Donald C. Morrell  
Washington, D. C.



Robert C. DeLoach, Jr.



Gordon E. Malmfeldt  
William Arthur Meincke



Donald T. Perrine



Karl L. Stefansson



b6  
b7C

Name: Donald C. Morrell

Title: Special Agent

EOD: 8/18/47

Grade: GS-15, \$18,170

Veteran

Not on probation

ASSISTANT DIRECTOR C. D. DE LOACH:

Mr. Morrell is Section Chief of the Correspondence and Tours Section, having assumed this position on March 14, 1960. He presents an excellent, well groomed appearance and he is decidedly personable. During his tenure of his Section, this man has performed his duties in an exemplary manner, displaying a leadership ability which has resulted in an above-average performance in every respect. He is intelligent, loyal, efficient and completely professional. He is an unquestioned asset to the FBI, and I am most pleased to have him as a member of my Division. Since the last inspection, he has been commended once and he has received one letter of censure for an error in an outgoing piece of correspondence. Despite his heavy responsibilities he also willingly devotes a large amount of time to the Special Agents Mutual Benefit Program.

Rating: Excellent

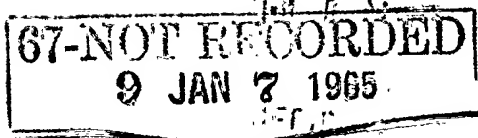
CRIME RECORDS DIVISION INSPECTION

December 3, 1964

CDD:dgs

*[Handwritten signature]*

See Inspector's Comments Page 2.



*164*

*3 JIC*

INSPECTOR W. MARK FELT  
(H. E. Campbell:bhg, 12/23/64)

Inspector concurs in comments of  
Assistant Director regarding  
Mr. Morrell. His Section operates

*W*  
continuously at a fast tempo in handling a high volume of short deadlined and highly sensitive correspondence. His attitude is excellent, he is interested in and available for administrative advancement and indicated he has no personal problems. Potential for advancement deemed excellent.

*X*

January 22, 1965

Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

Jan 22 11 22 AM '65  
REC'D-READING ROOM  
FBI

Dear Mr. Morrell:

I am taking this opportunity to commend you and, through you, the personnel of the Correspondence and Tours Section for the splendid manner in which an extremely heavy volume of mail during the past two months has been handled.

All of you were unusually efficient, enthusiastic and competent in carrying out your responsibilities during this time and through your diligent and devoted efforts the work was expeditiously completed. I want to thank you for your expert leadership and ask you to convey my sincere appreciation to everyone in the section for a job very well done.

Sincerely yours,

J. Edgar Hoover

1 - Mr. DeLoach (Personal Attention)

Copies of this letter are being prepared for placing in appropriate personnel files.

1 - [ ] (Sent Direct)

CTP (55) XEROX  
67-421042  
FEB 8 1965

Based on personal letter of Mr. Morrell to Mr. DeLoach 1-18-65 and Mr. Mohr's note of 1-20-65. Copies prepared and attached for placing in files of: (Over)

MAIL ROOM ☐ TELETYPE UNIT ☐

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

b6  
b7c

Letter to Mr. Donald C. Morrell  
Washington, D. C.



Robert C. DeLoach, Jr.



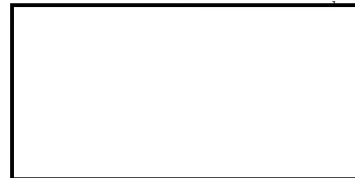
Gordon E. Malmfeldt  
William A. Meincke



Donald T. Perrine



Karl L. Stefansson



b6  
b7C



## PAST SAFE DRIVING RECORD CERTIFICATION

TO BE FILLED IN BY OPERATOR

NAME OF OPERATOR (PRINT - LAST, FIRST, MIDDLE INITIAL) <b>Morrell, Donald C.</b>		DATE <b>3-4-65</b>
DIVISION AND SECTION ASSIGNED <b>Crime Records Division, Corres. and Tours Sect.</b>		POSITION TITLE <b>Special Agent</b>
THIS IS TO CERTIFY THAT I PRESENTLY <input checked="" type="checkbox"/> HOLD <input type="checkbox"/> DO NOT HOLD A VALID MOTOR VEHICLE OPERATOR'S PERMIT OR DRIVER'S LICENSE.		
PERMIT ISSUED BY: (STATE, TERRITORY POSSESSION, DISTRICT) <b>State of Maryland</b>	PERMIT NUMBER <b>M-640-149-119-442-R</b>	PERMIT EXPIRES <b>6/66</b>
THIS IS AN <u>UNRESTRICTED</u> <del>RESTRICTED</del> PERMIT. (IF RESTRICTED, EXPLAIN BELOW) (STRIKE OUT ONE)		
THIS FURTHER CERTIFIES THAT DURING THE PAST THREE YEARS I HAVE DRIVEN A MOTOR VEHICLE (GOVERNMENT OR PERSONALLY OWNED) APPROXIMATELY <u>13,000</u> MILES. DURING THIS TIME (A) I <input type="checkbox"/> HAVE <input checked="" type="checkbox"/> HAVE NOT RECEIVED A TRAFFIC VIOLATION TICKET; (B) I <input type="checkbox"/> HAVE <input checked="" type="checkbox"/> HAVE NOT BEEN HELD AT FAULT* AS THE DRIVER OF A MOTOR VEHICLE INVOLVED IN A TRAFFIC ACCIDENT. IF AFFIRMATIVE ANSWER, PLEASE EXPLAIN IN ADJACENT SPACE GIVING NUMBER AND DATES OF OFFENSES.		
* "AT FAULT" MEANS ANY CASE IN WHICH RESPONSIBILITY IS CONCEDED BY EMPLOYEE OR HIS INSURANCE COMPANY OR LIABILITY IS FIXED BY DULY CONSTITUTED AUTHORITY.		<i>Donald C. Morrell</i> SIGNATURE OF OPERATOR

TO BE FILLED IN BY REVIEWING OFFICIAL

NAME OF REVIEWING OFFICIAL (PRINT - LAST, FIRST, MIDDLE INITIAL) <b>DELOACH, C.D.</b>	POSITION TITLE <b>ASST. DIR</b>	DATE <b>3-29-65</b>
THE PERSONNEL FILE OF THIS EMPLOYEE HAS BEEN REVIEWED AND REFLECTS THE FOLLOWING INFORMATION CONCERNING THE OPERATION OF A MOTOR VEHICLE ON OFFICIAL BUSINESS DURING THE PAST THREE YEARS:		
<input checked="" type="checkbox"/> CONTINUOUS SAFE DRIVING RECORD <input type="checkbox"/> INVOLVED IN TRAFFIC ACCIDENT AND FOUND AT FAULT **		
I CERTIFY THAT THIS EMPLOYEE IS:		
<input checked="" type="checkbox"/> QUALIFIED ON THE BASIS OF HIS SAFE DRIVING RECORD TO OPERATE MOTOR VEHICLES ON OFFICIAL BUSINESS. <input type="checkbox"/> NOT QUALIFIED AND MUST DEMONSTRATE HIS QUALIFICATIONS BY SATISFACTORILY PASSING A ROAD TEST EXAMINATION BEFORE OPERATING A MOTOR VEHICLE ON OFFICIAL BUSINESS.		
REMARKS:		
** "AT FAULT" MEANS ANY CASE IN WHICH THE BUREAU HAS TAKEN DISCIPLINARY ADMINISTRATIVE ACTION AGAINST THE EMPLOYEE.		<i>C. D. DeLoach</i> (SIGNATURE OF REVIEWING OFFICIAL)



**UNITED STATES DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION**

*In Reply, Please Refer to  
File No.*

Director  
Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C. 20535

Dear Sir:

For inclusion in the fund to be paid to the designated beneficiary of any Special Agent of the FBI who has previously contributed to this fund and who dies from any cause except self-destruction while employed as a Special Agent, I am forwarding herewith (by Check - Money Order) the sum of \$10, payable to S.A.I.F., to be included in said fund. Payment will be made for death by self-destruction after the Agent has been a member of the fund for a continuous period of two years. It is understood and agreed that the sum tendered herewith is a voluntary, gratuitous contribution to said fund which I understand is to be administered in the following manner.

The Director of the FBI will appoint a committee which shall consider all matters pertaining to the acquisition, safe keeping and expending of said fund, which committee will recommend appropriate action to the Director in pertinent matters. The Assistant Director of the Administrative Division of the FBI shall receive all contributions and account for same to the Director. Upon the death of any Special Agent who is a member of said fund the appointed committee will consider the case and submit a recommendation to the Director as to its conclusions. Appropriate instructions will then be issued to the Assistant Director of the Administrative Division, directing him to pay to the designated beneficiary the sum of \$10,000. The liability of the fund shall not under any circumstances exceed the amount of monies in the fund at the time any liability shall occur.

**EXECUTE IN DUPLICATE AND SUBMIT BOTH COPIES TO THE BUREAU**

Official Bureau Name (please type or print)	Date	Office of Assignment (or SOG Division)
SA Donald C. Morrell	3-1-65	Crime Records Division

The following person is designated as my beneficiary for Special Agents Insurance Fund:

Name (primary beneficiary; use given first name if female)	Relationship
Elizabeth H. Morrell	Wife

Address  
5516 Charlcote Road, Bethesda, Maryland

Name (contingent beneficiary, if desired; use given first name if female)	Relationship
[Redacted]	Son and Daughter

Address  
[Redacted]

Do you desire to designate the above-listed beneficiaries as the beneficiary and contingent beneficiary respectively of the Chas. S. Ross Fund as well? ☒ Yes ☐ No If not, the entire following portion must be executed.

The following person is designated as my beneficiary under the Chas. S. Ross Fund providing \$1500 death benefit to beneficiary of agents killed in the line of duty, other than travel accidents.

Name (primary beneficiary; use given first name if female)	Relationship

Address

Name (contingent beneficiary, if desired; use given first name if female)	Relationship

Address

Very truly yours,

Payment Received  
Special Agents Insurance Fund

MAR 9 1965

J. Edgar Hoover, Director

*Donald C. Morrell*  
Special Agent

REPORT OF MEDICAL EXAMINATION

F.B.I.

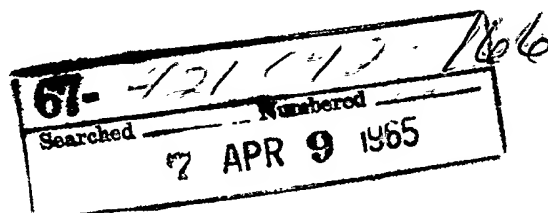
1. LAST NAME—FIRST NAME—MIDDLE NAME <u>MORRELL, DONALD CHARL</u>		2. GRADE AND COMPONENT OR POSITION <u>SA</u>		3. IDENTIFICATION NO.	
4. HOME ADDRESS (Number, street or RFD, city or town, zone and State)		5. PURPOSE OF EXAMINATION <u>Annual</u>		6. DATE OF EXAMINATION <u>3-19-65</u>	
7. SEX <u>M</u>	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY CIVILIAN		10. AGENCY	
11. ORGANIZATION UNIT		12. DATE OF BIRTH <u>6-13-18</u>			
13. PLACE OF BIRTH <u>N. Y.</u>		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN			
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS <u>WVAC</u>		16. OTHER INFORMATION			
17. RATING OR SPECIALTY		TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS	

CLINICAL EVALUATION

NOR- MAL	(Check each item in appropriate column; enter "NE" if not evaluated.)	ABNOR- MAL
	18. HEAD, FACE, NECK AND SCALP	
	19. NOSE	
	20. SINUSES	
	21. MOUTH AND THROAT	
	22. EARS—GENERAL (Int. & ext. canals) (Auditory acuity under items 70 and 71)	
	23. DRUMS (Perforation)	
	24. EYES—GENERAL (Visual acuity and refraction under items 59, 60 and 67)	
	25. OPHTHALMOSCOPIC	
	26. PUPILS (Equality and reaction)	
	27. OCULAR MOTILITY (Associated parallel movements, nystagmus)	
	28. LUNGS AND CHEST (Include breasts)	
	29. HEART (Thrust, size, rhythm, sounds)	
	30. VASCULAR SYSTEM (Varicosities, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Hemorrhoids, fistulae) (Prostate, if indicated)	
	33. ENDOCRINE SYSTEM	
	34. G-U SYSTEM	
	35. UPPER EXTREMITIES (Strength, range of motion)	
	36. FEET	
	37. LOWER EXTREMITIES (Except feet) (Strength, range of motion)	
	38. SPINE, OTHER MUSCULOSKELETAL	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. SKIN, LYMPHATICS	
	41. NEUROLOGIC (Equilibrium, tests under item 72)	
	42. PSYCHIATRIC (Specify any personality deviation)	
	43. PELVIC (Females only) (Check how done)	
	<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES. (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

REC-143



ENCLOSURE

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)		REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES	
O—Restorable teeth (—Nonrestorable teeth)		Type III EXAM	
X—Missing teeth XXX—Replaced by dentures		CLASS	
(6 X 8)—Fixed bridge, brackets to include abutments		No defects noted	
R I G H T	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24		
L E F T	32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17 16 15 14 13 12 11 10 9		

LABORATORY FINDINGS

45. URINALYSIS: A. SPECIFIC GRAVITY <u>1.025</u>		46. CHEST X-RAY (Place, date, film number and result)	
B. ALBUMIN <u>neg</u>	D. MICROSCOPIC	8737-65-WNL	
C. SUGAR <u>neg</u>	48. EKG <u>WNL</u>	50. OTHER TESTS	
47. SEROLOGY (Specify test used and result)	49. BLOOD TYPE AND RH FACTOR	CBC - See Report	

# MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT 57 1/2	52. WEIGHT 158	53. COLOR HAIR BRN	54. COLOR EYES BLUE	55. BUILD: (Check one)	SLENDER	MEDIUM	HEAVY	OBESE	56. TEMPERATURE		
57. BLOOD PRESSURE (Arm at heart level)				58. PULSE (Arm at heart level)							
A. SITTING	SYS. 110 DIAS. 68	B. RECUMBENT	SYS. DIAS.	C. STANDING (3 min.)	SYS. DIAS.	A. SITTING 60	B. AFTER EXERCISE	C. 2 MIN. AFTER	D. RECUMBENT	E. AFTER STANDING 3 MIN.	
59. DISTANT VISION				60. REFRACTION				61. NEAR VISION			
RIGHT 20/50		CORR. TO 20/20		BY <i>lmm</i> S.		CX		24-6		CORR. TO BY	
LEFT 20/60		CORR. TO 20/20		BY <i>lmm</i> S.		CX		24-6		CORR. TO BY	
62. HETEROPHORIA (Specify distance)											
ES°		EX°		R. H.		L. H.		PRISM DIV.		PRISM CONV. CT	
63. ACCOMMODATION				64. COLOR VISION (Test used and result)				65. DEPTH PERCEPTION (Test used and score)		UNCORRECTED	
RIGHT LEFT				APC 1940 18/18						CORRECTED	
66. FIELD OF VISION				67. NIGHT VISION (Test used and score)				68. RED LENS TEST		69. INTRAOCULAR TENSION	
70. HEARING				71. AUDIOMETER							
RIGHT WV 15 /15 SV 15 /15				250 256 500 512 1000 1024 2000 2048 3000 2896 4000 4096 6000 6144 8000 8192							
LEFT WV 15 /15 SV 15 /15				RIGHT LEFT							
72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)											

## 73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

Anemia on last PE with complete ~~65~~ evaluation & negative results - Under Rx by LMM2 & Fe -

*Prostate - D*

(Use additional sheets if necessary)

## 74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

*OK*  
*3-26-65*  
*J. H. Jones*

## 75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

*CBL*

## 76. A. PHYSICAL PROFILE

P	U	L	H	E	S

## 77. EXAMINEE (Check)

- A. ☒ QUALIFIED FOR  
B. ☐ IS NOT QUALIFIED FOR

## B. PHYSICAL CATEGORY

## 78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

## 79. TYPED OR PRINTED NAME OF PHYSICIAN

SIGNATURE

## 80. TYPED OR PRINTED NAME OF PHYSICIAN

SIGNATURE

## 81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)

SIGNATURE

## 82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY

SIGNATURE

NUMBER OF ATTACHED SHEETS

# REPORT OF MEDICAL HISTORY

89-103

THIS INFORMATION IS FOR OFFICIAL USE ONLY AND WILL NOT BE RELEASED TO UNAUTHORIZED PERSONS

1. LAST NAME—FIRST NAME—MIDDLE NAME <b>MORRELL, DONALD C.</b>			2. GRADE AND COMPONENT OR POSITION <b>FBI</b>		3. IDENTIFICATION NO.
4. HOME ADDRESS (Number, street or RFD, city or town, zone and State) <b>5516 CHARLATE ROAD, BETHESDA, MARYLAND</b>			5. PURPOSE OF EXAMINATION <b>ANNUAL PHYSICAL</b>		6. DATE OF EXAMINATION <b>MARCH 19, 1965</b>
7. SEX <b>MALE</b>	8. RACE <b>WHITE</b>	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY <b>4</b> CIVILIAN <b>17+</b>		10. AGENCY <b>FBI</b>	11. ORGANIZATION UNIT
12. DATE OF BIRTH <b>JUNE 13, 1968</b>		13. PLACE OF BIRTH <b>BROOKLYN, NEW YORK</b>		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN <b>ELIZABETH H. MORRELL, WIFE (same Address)</b>	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS				16. OTHER INFORMATION	

17. STATEMENT OF EXAMINEE'S PRESENT HEALTH IN OWN WORDS. (Follow by description of past history, if complaint exists)

Good - LAST PHYSICAL EXAM, AND SUBSEQUENT PHYSICAL BY PRIVATE PHYSICIAN DISCLOSED SLIGHT ANEMIA. TAKING IRON (FERRO) PILLS.

18. FAMILY HISTORY					19. HAS ANY BLOOD RELATION (Parent, brother, sister, other) OR HUSBAND OR WIFE:			
RELATION	AGE	STATE OF HEALTH	IF DEAD, CAUSE OF DEATH	AGE AT DEATH	YES	NO	(Check each item)	RELATION(S)
FATHER		Deceased	Coronary Occlusion	61			HAD TUBERCULOSIS	
MOTHER	73	Good					HAD SYPHILIS	
SPOUSE	46	Good					HAD DIABETES	
	50	Good					HAD CANCER	
BROTHERS AND SISTERS							HAD KIDNEY TROUBLE	
							HAD HEART TROUBLE	
							HAD STOMACH TROUBLE	
							HAD RHEUMATISM (Arthritis)	
CHILDREN		Good					HAD ASTHMA, HAY FEVER, HIVES	
		Good					HAD EPILEPSY (Fits)	
							COMMITTED SUICIDE	
							BEEN INSANE	

20. HAVE YOU EVER HAD OR HAVE YOU NOW (Place check at left of each item)								
YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)
✓		SCARLET FEVER, ERYSIPELAS	✓		GOITER	✓		TUMOR, GROWTH, CYST, CANCER
✓		DIPHTHERIA	✓		TUBERCULOSIS	✓		RUPTURE
✓		RHEUMATIC FEVER	✓		SOAKING SWEATS (Night sweats)	✓		APPENDICITIS
✓		SWOLLEN OR PAINFUL JOINTS	✓		ASTHMA	✓		PILES OR RECTAL DISEASE
✓		MUMPS	✓		SHORTNESS OF BREATH	✓		FREQUENT OR PAINFUL URINATION
✓		WHOOPING COUGH	✓		PAIN OR PRESSURE IN CHEST	✓		KIDNEY STONE OR BLOOD IN URINE
✓		FREQUENT OR SEVERE HEADACHE	✓		CHRONIC COUGH	✓		SUGAR OR ALBUMIN IN URINE
✓		DIZZINESS OR FAINTING SPELLS	✓		PALPITATION OR POUNDING HEART	✓		BOILS
✓		EYE TROUBLE	✓		HIGH OR LOW BLOOD PRESSURE	✓		VENEREAL DISEASE
✓		EAR, NOSE OR THROAT TROUBLE	✓		CRAMPS IN YOUR LEGS	✓		RECENT GAIN OR LOSS OF WEIGHT
✓		RUNNING EARS	✓		FREQUENT INDIGESTION	✓		ARTHRITIS OR RHEUMATISM
✓		CHRONIC OR FREQUENT COLDS	✓		STOMACH, LIVER OR INTESTINAL TROUBLE	✓		BONE, JOINT, OR OTHER DEFORMITY
✓		SEVERE TOOTH OR GUM TROUBLE	✓		GALL BLADDER TROUBLE OR GALL STONES	✓		LAMENESS
✓		SINUSITIS	✓		JAUNDICE	✓		LOSS OF ARM, LEG, FINGER, OR TOE
✓		HAY FEVER	✓		ANY REACTION TO SERUM, DRUG OR MEDICINE	✓		PAINFUL OR "TRICK" SHOULDER OR ELBOW

21. HAVE YOU EVER (Check each item)			22. FEMALES ONLY: A. HAVE YOU EVER—			B. COMPLETE THE FOLLOWING:		
✓		WORN GLASSES	✓		ATTEMPTED SUICIDE			AGE AT ONSET OF MENSTRUATION
✓		WORN AN ARTIFICIAL EYE	✓		BEEN A SLEEP WALKER			INTERVAL BETWEEN PERIODS
✓		WORN HEARING AIDS	✓		LIVED WITH ANYONE WHO HAD TUBERCULOSIS			DURATION OF PERIODS
✓		STUTTERED OR STAMMERED	✓		COUGHED UP BLOOD			DATE OF LAST PERIOD
✓		WORN A BRACE OR BACK SUPPORT	✓		BLED EXCESSIVELY AFTER INJURY OR TOOTH EXTRACTION			QUANTITY: <input type="checkbox"/> NORMAL <input type="checkbox"/> EXCESSIVE <input type="checkbox"/> SCANTY
23. HOW MANY JOBS HAVE YOU HAD IN THE PAST THREE YEARS? <b>ONE</b>			24. WHAT IS THE LONGEST PERIOD YOU HELD ANY OF THESE JOBS? MONTHS <b>17+ years</b>			25. WHAT IS YOUR USUAL OCCUPATION? <b>FBI Agent</b>		
						26. ARE YOU (Check one) <input checked="" type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED		

1166

1166

1166

YES	NO	CHECK EACH ITEM YES OR NO. EVERY ITEM CHECKED "YES" MUST BE FULLY EXPLAINED IN BLANK SPACE ON RIGHT
	✓	27. HAVE YOU BEEN UNABLE TO HOLD A JOB BECAUSE OF: A. SENSITIVITY TO CHEMICALS, DUST, SUNLIGHT, ETC.
	✓	B. INABILITY TO PERFORM CERTAIN MOTIONS
	✓	C. INABILITY TO ASSUME CERTAIN POSITIONS
	✓	D. OTHER MEDICAL REASONS (If yes, give reasons)
	✓	28. HAVE YOU EVER WORKED WITH RADIOACTIVE SUBSTANCE?
	✓	29. DID YOU HAVE DIFFICULTY WITH SCHOOL STUDIES OR TEACHERS? (If yes, give details)
	✓	30. HAVE YOU EVER BEEN REFUSED EMPLOYMENT BECAUSE OF YOUR HEALTH? (If yes, state reason and give details)
	✓	31. HAVE YOU EVER BEEN DENIED LIFE INSURANCE? (If yes, state reason and give details)
✓		32. HAVE YOU HAD, OR HAVE YOU BEEN ADVISED TO HAVE, ANY OPERATIONS? (If yes, describe and give age at which occurred) <i>T + A age 5 years Submucous resection age 44</i>
	✓	33. HAVE YOU EVER BEEN A PATIENT (committed or voluntary) IN A MENTAL HOSPITAL OR SANATORIUM? (If yes, specify when, where, why, and name of doctor, and complete address of hospital or clinic)
	✓	34. HAVE YOU EVER HAD ANY ILLNESS OR INJURY OTHER THAN THOSE ALREADY NOTED? (If yes, specify when, where, and give details)
✓		35. HAVE YOU CONSULTED OR BEEN TREATED BY CLINICS, PHYSICIANS, HEALERS, OR OTHER PRACTITIONERS WITHIN THE PAST 5 YEARS? (If yes, give complete address of doctor, hospital, clinic, and details) <i>Anemia, Dr. James Nolan, Washington Clinic 1964</i>
	✓	36. HAVE YOU TREATED YOURSELF FOR ILLNESSES OTHER THAN MINOR COLDS? (If yes, which illnesses)
	✓	37. HAVE YOU EVER BEEN REJECTED FOR MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date and reason for rejection)
	✓	38. HAVE YOU EVER BEEN DISCHARGED FROM MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date, reason, and type of discharge: whether honorable, other than honorable, for unfitness or unsuitability)
	✓	39. HAVE YOU EVER RECEIVED, IS THERE PENDING, HAVE YOU APPLIED FOR, OR DO YOU INTEND TO APPLY FOR PENSION OR COMPENSATION FOR EXISTING DISABILITY? (If yes, specify what kind, granted by whom, and what amount, when, why)

I CERTIFY THAT I HAVE REVIEWED THE FOREGOING INFORMATION SUPPLIED BY ME AND THAT IT IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.  
I AUTHORIZE ANY OF THE DOCTORS, HOSPITALS, OR CLINICS MENTIONED ABOVE TO FURNISH THE GOVERNMENT A COMPLETE TRANSCRIPT OF MY MEDICAL RECORD FOR PURPOSES OF PROCESSING MY APPLICATION FOR THIS EMPLOYMENT OR SERVICE.

TYPED OR PRINTED NAME OF EXAMINEE

DONALD C. MORRELL

SIGNATURE

Donald C. Morrell

40. PHYSICIAN'S SUMMARY AND ELABORATION OF ALL PERTINENT DATA (Physician shall comment on all positive answers in items 20 thru 39)

ROS - ess wnc's -

TYPED OR PRINTED NAME OF PHYSICIAN OR EXAMINEE

DATE

3-19-65

SIGNATURE

*[Signature]*

NUMBER OF ATTACHED SHEETS

**Attachment to Standard Form 88, Report of Medical Examination  
For Information and Guidance of Medical Examiner**

Name of Examinee MORRELL DONALD CLARK  
(Type or print) Last First Middle

The following portions of the attached examination report form need not be completed:

2	14	68
3	17	69
4	62	72
9	65	76
11	67	

46. Is necessary unless facilities for affording same are not readily available.
48. Not required unless examinee is over 35 years of age or examination indicates such is desirable.
49. Is necessary unless facilities for affording same are not readily available.
71. Audiometer examinations should be afforded whenever possible for all Special Agent applicants and Special Agents. Applicants for the Special Agent position will not be accepted if the hearing loss exceeds a 15 decibel average in either ear in the conversational speech range (500, 1000, 2000 cycles).

**For All Examinees, Whether Clerical or Special Agent Applicants or Employees:**

*The medical examiner should answer the following question:*

Examinee ☒ is ☒ is not qualified for strenuous physical exertion.

**To be Answered in the Case of All Male Employees and Male Applicants:**

1. Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

2. Does examinee have any defects prohibiting safe operation of motor vehicles?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

3. For safe driving of motor vehicles, Civil Service Commission requires distant vision must test at least 20/40 in one eye and 20/100 in the other, corrected or uncorrected. Should examinee wear corrective glasses while operating a motor vehicle? ☒ Yes ☐ No

If recommendation is based on a factor other than above standard, indicate basis \_\_\_\_\_

**ENCLOSURE**

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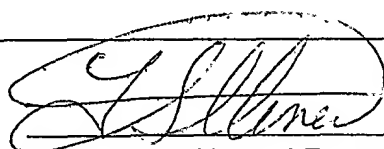
### Desirable Weight Ranges for Males

Height	Small Frame	Medium Frame	Large Frame
5' 4"	117 - 125	123 - 135	131 - 148
5' 5"	120 - 129	126 - 139	134 - 152
5' 6"	124 - 133	130 - 143	138 - 157
5' 7"	128 - 137	134 - 148	143 - 162
5' 8"	132 - 141	138 - 152	147 - 166
5' 9"	136 - 146	142 - 156	151 - 170
5' 10"	140 - 150	146 - 161	155 - 175
5' 11"	144 - 154	150 - 166	160 - 180
6'	148 - 158	154 - 171	164 - 185
6' 1"	152 - 163	158 - 176	169 - 190
6' 2"	156 - 167	163 - 181	174 - 195
6' 3"	160 - 171	168 - 186	178 - 200
6' 4"	169 - 180	178 - 196	188 - 210
6' 5"	174 - 185	182 - 202	192 - 216

4. Examinee's frame is ☐ small ☐ medium ☒ large
5. Considering above weight table, the examinee's frame, and other individual physical characteristics, I consider his present weight ☒ Satisfactory ☐ Excessive ☐ Deficient
6. Under proper medical supervision, examinee should ☐ lose \_\_\_\_\_ pounds  
☐ gain \_\_\_\_\_ pounds

REC'D - ADM. DIV.  
 FBI  
 MAR 20 9 16 AM '65

REC'D - ADM. DIV.  
 FBI  
 APR 5 5 07 PM '65



(Signature of Medical Examiner)

7-19-65  
 (Date)



FEDERAL BUREAU OF INVESTIGATION  
UNITED STATES DEPARTMENT OF JUSTICE

## REPORT OF PERFORMANCE RATING

Name of Employee: DONALD C. MORRELL

Where Assigned: Crime Records Correspondence & Tours Section  
(Division) (Section, Unit)

Official Position Title and Grade: Special Agent - Chief, Correspondence & Tours Section, GS-15

Rating Period: from April 1, 1964 to March 31, 1965

ADJECTIVE RATING: EXCELLENT Employee's Initials DM  
Outstanding, Excellent, Satisfactory, Unsatisfactory

Rated by: C. D. J. Looch Assistant Director 4/1/65  
Signature Title Date

Reviewed by: M. P. Callahan Assistant Director APR 9 1965  
Signature Title Date

Rating Approved by: \_\_\_\_\_  
Signature Title Date

## TYPE OF REPORT

☒ Official  
☒ Annual

☐ Administrative  
☐ 60-Day  
☐ 90-Day  
☐ Transfer  
☐ Separation-from-Service

67-	1212113	-167
Searched	Numbered	
6 APR 13 1965		

REC-140

18/38  
15 APR 15 1965

# PERFORMANCE RATING GUIDE FOR INVESTIGATIVE PERSONNEL

(For use as attachment to Performance Rating Form No. FD-185)

Name of Employee DONALD C. MORRELL Title Special Agent - Chief, Correspondence & Tours  
Rating Period: from 4-1-64 to 3-31-65

## RATING GUIDE AND CHECK-LIST

Note: Only those items having pertinent bearing on employee's performance should be rated. All employees in same salary grade should be compared.

### RATE ITEMS AS FOLLOWS:

- + Outstanding (exceeding excellent and deserving of special commendation).  
E Excellent.  
✓ Satisfactory (good or very good).  
- Unsatisfactory.  
0 No opportunity to appraise performance during rating period.

### Guide for determining adjective ratings:

- "Outstanding" adjective rating requires (A) that all elements be + and (B) that each and every rated element be factually justified by narrative details, including reasons for considering each worthy of Special Commendation and be attached to FD-185a.
- "Excellent," "Satisfactory" or "Unsatisfactory" adjective ratings will depend upon the composite result of evaluating all rated elements rather than following any mechanical formulas; however, for an employee to be rated "Excellent" he must not be rated unsatisfactory on any performance evaluation factors on the rating guide and check-list and must be rated "Excellent" or "Outstanding" on the majority of such rating factors. Good judgment must be exercised to insure that adjective rating is reasonable in the light of elements rated.
  - Any element rated "Unsatisfactory" must be supported by narrative comments.
  - An official rating of "Unsatisfactory" must be supported in writing stating (1) wherein the performance is unsatisfactory, (2) the facts of the (90-day) prior warning, and (3) the efforts made after the warning to help the employee bring his performance up to a satisfactory level and must be attached to FD-185a.

- |   |   |
|---|---|
| <u>+</u> (1) Personal appearance.   | <u>E</u> (16) Firearms ability.   |
| <u>+</u> (2) Personality and effectiveness of his personal contacts.  | <u>0</u> (17) Development of informants and sources of information.   |
| <u>+</u> (3) Attitude (including dependability, cooperativeness, loyalty, enthusiasm, amenability and willingness to equitably share work load).  | <u>+</u> (18) Reporting ability: <ul style="list-style-type: none"> <li><u>✓</u> (a) Investigative reports</li> <li><u>✓</u> (b) Summary reports</li> <li><u>+</u> (c) Memos, letters, wires</li> </ul> (Consider: <u>+</u> conciseness; <u>+</u> clarity; <u>+</u> organization; <u>+</u> thoroughness; <u>+</u> accuracy; <u>+</u> adequacy and pertinency of leads; <u>+</u> administrative detail.)   |
| <u>+</u> (4) Physical fitness (including health, energy, stamina).  | <u>0</u> (19) Performance as a witness.   |
| <u>+</u> (5) Resourcefulness and ingenuity.   | <u>+</u> (20) Executive ability: <ul style="list-style-type: none"> <li><u>+</u> (a) Leadership</li> <li><u>+</u> (b) Ability to handle personnel</li> <li><u>+</u> (c) Planning</li> <li><u>+</u> (d) Making decisions</li> <li><u>+</u> (e) Assignment of work</li> <li><u>+</u> (f) Training subordinates</li> <li><u>+</u> (g) Devising procedures</li> <li><u>+</u> (h) Emotional stability</li> <li><u>+</u> (i) Promoting high morale</li> <li><u>+</u> (j) Getting results</li> </ul> |
| <u>+</u> (6) Forcefulness and aggressiveness as required.   | <u>0</u> (21) Ability on raids and dangerous assignments: <ul style="list-style-type: none"> <li><u>+</u> (a) As leader</li> <li><u>+</u> (b) As participant</li> </ul>   |
| <u>+</u> (7) Judgment, including common sense, ability to arrive at proper conclusions, ability to define objectives.   | <u>+</u> (22) Organizational interest, such as making of suggestions for improvement.   |
| <u>+</u> (8) Initiative and the taking of appropriate action on own responsibility.   | <u>+</u> (23) Ability to work under pressure.   |
| <u>+</u> (9) Planning ability and its application to the work.  | <u>+</u> (24) Miscellaneous. Specify and rate: <ul style="list-style-type: none"> <li><u>+</u> Dictation ability</li> </ul>   |
| <u>+</u> (10) Accuracy and attention to pertinent detail.   |   |
| <u>+</u> (11) Industry, including energetic, consistent application to duties.  |   |
| <u>E</u> (12) Productivity, including amount of acceptable work produced and rate of progress on or completion of assignments. Also consider adherence to deadlines unless failure to meet is attributable to causes beyond employee's control.   |   |
| <u>+</u> (13) Knowledge of duties, instructions, rules and regulations, including readiness of comprehension and "know how" of application.   |   |
| <u>0</u> (14) Investigative ability and results: <ul style="list-style-type: none"> <li><u>+</u> (a) Internal security cases</li> <li><u>+</u> (b) Criminal or general investigative cases</li> <li><u>+</u> (c) Fugitive cases</li> <li><u>+</u> (d) Applicant cases</li> <li><u>+</u> (e) Accounting cases</li> </ul> |   |
| <u>0</u> (15) Physical surveillance ability.  |   |

A. Specify general nature of assignment during most of rating period (such as security, criminal, applicant squad, or as Resident Agent, supervisor, instructor, etc.):

Section Chief - Correspondence and Tours Section

B. Specify employee's most noteworthy special talents (such as investigator, desk man, research, instructor, speaker):

Desk Man - Lecturer - Research

- C. (1) Is employee available for general assignment wherever needs of service require? Yes (If answer is not "yes," explain in narrative comments.)  
(2) Is employee available for special assignment wherever needs of service require? Yes (If answer is not "yes," explain in narrative comments.)

D. 1. Has employee had an abnormal sick leave record during rating period? No 2. Has employee used more sick leave (including annual leave or LWOP for illness) during rating period than the amount of sick leave earned during such period? No (If answer to either question is "yes," explain in narrative comments.)

E. Is employee qualified to operate a motor vehicle incidental to his official duties? ☒ Yes ☐ No  
If answer is "yes," personnel file must reflect the following: (a) Has valid State or local operator's license for type vehicle he is to use.  
(b) Is physically fit to drive. (c) Past safe-driving record OK or has passed Bureau road test.

ADJECTIVE RATING:

**EXCELLENT**

Outstanding, Excellent, Satisfactory, Unsatisfactory

EMPLOYEE'S INITIALS

DM

DONALD C. MORRELL

Special Agent - Section Chief  
Correspondence and Tours Section  
Crime Records Division

Section Chief Morrell makes an outstanding appearance. He is impressive in appearance before other divisional groups and obviously makes a good impression upon his own personnel. He is an above-average administrator. He constantly looks for ways in which he can streamline administrative problems in his Section. His employees respect him. He has faced almost insurmountable responsibilities during the rating period and has met these problems with firmness and dedication. He speaks up at Division conferences and does not hesitate to make his opinion known. I particularly appreciate the manner in which he goes after huge volumes of work yet does not ask for additional personnel. The volume of mail has jumped over 50 percent since this Special Agent became Section Chief in March, 1960. Rather than asking for additional employees, he has found ways in which to streamline his responsibilities so as to meet the problems at hand.

Mr. Morrell, during the rating period, has received two letters of commendation. He has not received any letters of censure. The commendations were expressed by the Director for this Section Chief's efficient, enthusiastic and competent work in carrying out his responsibilities during a period which an extremely heavy volume of mail was received. Mr. Morrell and his family met the Director on 11/16/64 after this Section Chief was admitted for practice before the U. S. Supreme Court.

It would be well to note in this efficiency report the fact that this Section Chief not only handles his responsibilities in an above-average manner but also devotes considerable personal time in the activities of the Special Agents Mutual Benefit Association. He has personally been responsible for suggesting and carrying through to completion many proposed benefits for FBI employees in this program.

I consider this Section Chief to be rated "Excellent." I feel that he well deserves this rating.

CMM

**NARRATIVE COMMENTS**

1. PERSONAL APPEARANCE AND PERSONALITY:

See Special Narrative Comments

2. ABILITY TO PARTICIPATE IN RAIDS AND DANGEROUS ASSIGNMENTS:

NA

3. LIMITATIONS ON AVAILABILITY; PHYSICAL LIMITATIONS AFFECTING PERFORMANCE; AND SICK LEAVE INFORMATION:

See Special Narrative Comments

4. TYPE OF CASES OR WORK HANDLED AND APPRAISAL OF OVER-ALL PERFORMANCE, INCLUDING ABILITY TO HANDLE COMPLICATED INVESTIGATIVE MATTERS AND SUPERVISION REQUIRED:

See Special Narrative Comments

*Qum*

5. NUMBER OF INCENTIVE AWARDS AND COMMENDATIONS RECEIVED:

Mr. Morrell received two letters of commendation for efficient, enthusiastic and competent work in carrying out his responsibilities during a period when extremely heavy volume of mail was received.

6. DISCIPLINARY ACTION AND JUSTIFICATION FOR ANY UNSATISFACTORY ITEMS:

(List items taken into consideration on rating guide and check list.)

No letters of censure received.

7. PARTICIPATION IN INFORMANT PROGRAMS:

N. A.

8. TESTIFYING EXPERIENCE AND ABILITY:

N. A.

9. ACCOUNTING INFORMATION:

N. A.

10. POLICE INSTRUCTION:

N. A.

11. RESIDENT AGENTS:

N. A.

12. EXPERIENCE AND ABILITY AS INSPECTOR'S AIDE:

Mr. Morrell is a qualified Inspector's Aide but was not given any inspection assignments during the rating period because of the absolute necessity to keep him at his desk.

13. FOREIGN LANGUAGE ABILITY:

Language in which proficient NONE  
Completed language school ☐ Yes ☐ No  
Fluent in \_\_\_\_\_ language to extent Agent can handle typical investigative problems as follows: (1) Conversation form ☐ Yes ☐ No  
(2) Written form ☐ Yes ☐ No  
Evaluate language proficiency in each phase as excellent, very good, good, fair or unsatisfactory  

<u>Language</u>	<u>Read</u>	<u>Write</u>	<u>Speak</u>	<u>Understand</u>
<u>SPANISH</u>				<u>UNSATISFACTORY</u>

  
Frequency \_\_\_\_\_ language ability used during rating period:  
Frequency of use of \_\_\_\_\_ language ability anticipated during ensuing year:

14. ADMINISTRATIVE ADVANCEMENT:

- (a) Agent is interested in administrative advancement. ☒ Yes ☐ No  
(b) Agent is completely available for administrative advancement. ☒ Yes ☐ No  
(c) Agent is considered completely qualified at present for administrative advancement, including experience, ability, personality and appearance. ☒ Yes ☐ No  
(d) If answer to (c) is "Yes," Agent's qualifications considered  
☐ very good ☒ excellent ☐ outstanding  
(e) If answer to (c) is "No," Agent considered to have potential for future administrative advancement. (If applicable, explanatory comments required.) ☐ Yes ☐ No

May 5, 1965

Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Morrell:

It is a pleasure to commend, through you, the agents in the Correspondence and Tours Section who did such fine work in contributing to the preparation and presentation of the Bureau's portion of the "Early Bird" telecast last Sunday.

These men voluntarily disregarded their personal convenience in order to be of assistance in this project and their enthusiastic and competent services were of importance in the professional manner in which our portion was presented. I want you to convey my sincere appreciation for a job well done to each man who participated in this very worthwhile undertaking.

Sincerely yours,  
J. Edgar Hoover

1 - Mr. DeLoach (Personal Attention)  
Copies of this letter being placed in personnel files of appropriate personnel.

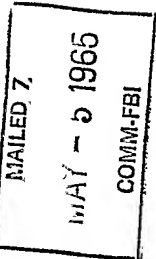
1 - [Redacted] (Sent Direct)  
CTP:ej  
(10)

Based on memo DeLoach to Mohr 5-3-65 re: " FBI Participation in 'Early Bird' Telecast, Sunday, May 2, 1965."  
Copies prepared and attached for placing in files of: (Over)

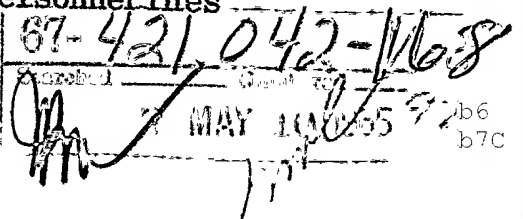
XEROX

MAY 17 1965

MAIL ROOM ☐ TELETYPE UNIT ☐



Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_



Letter to Mr. Donald C. Morrell  
Washington, D. C.



Donald T. Perrine  
Karl L. Stefansson

b6  
b7C



May 19, 1965

PERSONAL

Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

May 19 12 26 PM '65  
REC'D--READING ROOM  
F B I

Dear Mr. Morrell:

You reviewed and approved an outgoing communication dated May 13, 1965, at which time you failed to detect the fact that an accompanying legend card contained a serious error. It is apparent that you were not sufficiently careful in this instance.

Consequently, you should give more careful attention in the future to the review of such correspondence so that mistakes of this nature may be eliminated.

Very truly yours,

J. Edgar Hoover  
REC-141

John Edgar Hoover  
Director

MAILED 10  
MAY 19 1965  
COMM-FBI

2.  
1 - Mr. DeLoach (Personal Attention)  
1 - Crime Records Division Personnel File

JIC:skd

(5)

Based on memo, D. C. Morrell to DeLoach, 5-17-65, DCM:lch with Addendum of Administrative Division, JIC:skd, 5-18-65.

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

MAIL ROOM ☐ TELETYPE UNIT ☐

UNITED STATES GOVERNMENT

# Memorandum

TO : Mr. DeLoach

DATE: 5-17-65

FROM : D. C. Morrell

SUBJECT: CORRESPONDENCE TO [REDACTED]

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

In connection with a letter of acknowledgment of a letter of congratulations to the Director on his 41st Anniversary (yellow attached) an autographed photograph of the Director was to be prepared and sent under separate cover to the correspondent. In such instances a legend card is prepared showing the name of the person to whom the photograph is to be autographed, the date to be reflected and some identification background. In this instance the legend card, which merely accompanies the correspondence and is not actually a part of the letter, was prepared by [REDACTED] who inadvertently dated the legend card for 4-13-65 rather than 5-13-65 with the result that the Director autographed the photograph under date of 4-13-65 rather than 5-13-65.

This letter was reviewed for the Correspondence and Tours Section by me and for the Division by SA Hobson H. Adcock. I would like to point out that during this week this Section handled almost 1,300 letters which is a much larger volume than ordinary due in great part to the heavy volume of acknowledgments of letters and telegrams of congratulations to the Director on his Anniversary, a part of which project involved the correspondence in question. Both SA Morrell and SA Adcock have advised that they reviewed this correspondence along with many hundreds of others and in this large volume they did not detect that the legend card had been inappropriately dated for 4-13-65 rather than 5-13-65. [REDACTED] can offer no excuse for improperly preparing the card other than she must have hit the wrong key and failed to detect it.

## RECOMMENDATIONS:

(1) Accordingly, it is recommended that [REDACTED] be censured for the error in the legend card prepared by her.

(2) It is also recommended that appropriate reviewing errors be scored against SA Adcock and SA Morrell in keeping with the provisions of the error program for their failure to detect the improperly dated legend card.

Enclosures

1 - Mr. Cavanaugh

1 - [REDACTED]

DCM:lch (6)

4/11/65 XEROX  
MAY 28 1965

(OVER....)

*NC 119*  
ADDENDUM OF ADMINISTRATIVE DIVISION, JIC:skd, 5-18-65.

1: In accordance with Mr. Tolson's instruction, there are attached letters of censure to Inspector William S. ~~Hyde~~, SAs Donald C. ~~Morrell~~ and Hobson H. ~~Adcock~~ and [redacted] It is recommended that the letters be approved and sent.

b6  
b7C

2. There is attached a memorandum of explanation from [redacted] of the Bureau Reading Room who failed to detect the incorrect date on the legend card. In line with the above, it is recommended that she also be censured. A proposed letter to [redacted] is also attached.

*HA* *Quil* *3/19* *Key NC*

UNITED STATES GOVERNMENT

# Memorandum

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

TO : MR. TAVEL *✓*

DATE: May 17, 1965

FROM : *KMM* [redacted] - Reading Room

SUBJECT: LEGEND CARD FOR AUTOGRAPHED PHOTOGRAPH  
[redacted] DAVENPORT, IOWA  
INCORRECT DATE

*✓* *Q. J. Laugh*

b6  
b7C

*With regard to your request for an explanation concerning the incorrect date on a legend card, I failed to notice the discrepancy in the date on the card and the date of the letter.*

*I am very sorry this happened because it could have been a source of embarrassment to the Director. I shall do my best to avoid any mistake of this kind in the future.*

(KMM)

67-427211-92

UNITED STATES GOVERNMENT

# Memorandum

TO : Mr. DeLoach

DATE: 11-3-65

FROM : D. C. Morrell

SUBJECT: 16TH ANNUAL LAW ENFORCEMENT INSTITUTE  
UNIVERSITY OF MARYLAND  
BAYARD RUSTIN, LECTURER

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Wick \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

*That is not the issue. It is the fact they invited him to the Institute.*  
*Attaching the release of a statement as a matter of fact.*  
Attached are newspaper clippings of captioned matter which appeared in the 10-20-65 and 10-21-65 issues of "The Baltimore Evening Sun." The latter reports that three members of the Maryland Congressional delegation criticized a move by the Director canceling the appearance of an Agent before the Maryland Law Enforcement Institute because civil rights leader Bayard Rustin "spoke there last week." Senator Brewster told newsmen he found the move "regrettable." Representative Friedel (D-Maryland) characterized the cancellation as "alarming" and indicated he would send a "strong letter" protesting the Bureau's action. Representative Sickles (D-Maryland) said "the effect of the FBI's position could be either to restrict the academic freedom of the University or to deny to participants (in the Institute program) access to facts and conclusions available to the FBI. Either result would be unfortunate."

The Director instructed that Friedel and Sickles be sent a copy of the letter the Director sent Senator Brewster on this matter on 10-22-65. Proposed letters are attached in accordance with the Director's instructions.

REC-61  
Mr. Hoover also said consideration should be given to the feasibility of sending a copy of the Brewster letter to "The Baltimore Evening Sun." It is not felt we should do this as it is no longer timely. It is believed that publication of the Brewster letter in the Baltimore papers at this time could result in severe criticism of the FBI if the University of Maryland releases the facts leading up to the invitation of Rustin. These are that Dr. Donald Deppe, who extended the invitation of his own volition to Rustin, was a newcomer to the University. He has since admitted to representatives of the Bureau that he made a very bad mistake; he apologized profusely; and has promised it would not happen again. In view of these facts, it is not felt we would be on very strong ground in condemning the entire University and its faculty for Deppe's error.

Enclosures sent 11-4-65  
1 - Mr. DeLoach  
1 - M. A. Jones

DCM:kcf (4)

ENCLOSURE  
DEC 7 1965

CRIME RESEARCH  
CONTINUED - OVER

*I can't follow you. I don't see how Dr. Deppe could come out in public in defense of inviting Rustin after record of an egg-throwing.*  
PERS. REC. UNIT

Memorandum to Mr. DeLoach  
RE: 16th Annual Law Enforcement Institute

The 10-21-65 clipping from "The Evening Sun" was received by the Director on 11-2-65, and he commented "SAC should have alerted us of this when it appeared and not 1 1/2 weeks later." We are looking into this matter, and the Director will be advised separately.

RECOMMENDATIONS:

1. That the attached letters be forwarded to Representatives Friedel and Sickles.

*Yes.*  
*[Signature]*

2. That no copy of the Brewster letter be released to Baltimore papers.

*↑* *to*

*There is no need  
to know as Kaufman  
has on his own  
responsibility written  
a letter to the Sun  
saying practically  
what I had said.*

*[Signature]*

*I don't follow this -  
I see no reason  
why that  
Kaufman should  
not release  
the letter*

*11/3.*

*[Signature]*

# Brewster, Friedel, Sickles Attack Canceled Talk

Washington, Oct. 21 (Special)—Three members of the Maryland congressional delegation today criticized a move by FBI director J. Edgar Hoover canceling the appearance of an agent before the Maryland Law Enforcement Institute.

Mr. Hoover canceled the lecture appearance of a special agent, scheduled for December, because civil-rights leader Bayard Rustin spoke there last week, it was learned yesterday.

Senator Brewster (D., Md.) told newsmen today he found the move "regrettable."

## Joined By Friedel

He was joined by Representative Friedel (D., Md.), who characterized the cancellation as "alarming" and said he would join other members of the Maryland delegation in a "strong letter" protesting the bureau's action.

Representative Sickles (D., Md.) said the "effect of the FBI position could be either to restrict the academic freedom of the university or to deny to participants (in the institute program) access to facts and conclusions available to the FBI."

"Either result," the congressman charged, "would be unfortunate."

Senator Brewster took the position that the institute, "an official undertaking to improve the caliber of our law enforcement officers and their professional abilities, should have the benefit of the best advice available in the United States."

## "Regrettable," He Says

"Clearly one of the main sources of law enforcement information is the FBI," the Senator said.

"It is regrettable that the FBI is reluctant to send a speaker to a duly accredited official school run for the benefit of law enforcement officers," Senator Brewster challenged.

A spokesman for the University of Maryland, which sponsors the institute, said Special Agent Dwight Dalbey of the FBI Legal Research Department, had been scheduled to address the institute

(see Below)

*Send Friedel  
& Sickles a  
copy of letter  
sent Brewster*

December 14 at College Park and December 15 at Baltimore.

Mr. Dalbey was to speak on "due process in criminal interrogations with emphasis on the requirements of constitutional law bearing on the treatment of the arrested person under interrogation . . . particularly affecting the admission in evidence of any confession or admission in guilt that came from him."

The university spokesman said Mr. Dalbey was not paid the customary lecture fee for the two-day session, apparently because his services are underwritten by the bureau.

## Paid Regular Salary

A spokesman for the Department of Justice said FBI agents are paid their normal salary when addressing private groups or performing some other public information function.

He said that the bureau keeps no detailed records of how much is expended annually on this type of function.

The cancellation was revealed in a letter from the FBI chief to a Lynchburg (Va.) resident.

A spokesman for Mr. Hoover said today the FBI director had "no further comment" on his letter.

The spokesman said there is "no way of knowing now whether the bureau will permit agents to speak at future sessions of the institute."

The spokesman also commented that the sudden cancellation of an agent's appearance as a speaker or panel member before public and private bodies was "not without precedent."

(Indicate page, name of newspaper, city and state.)

— THE SUN

C22 THE EVENING SUN

— THE SUNDAY SUN

— THE AMERICAN

— BALTIMORE, MD.

Date: 10/21/65

Edition: FINAL

REG-61

Editor: BAYARD RUSTIN

ENCLOSURE

Character:

or

Classification:

Submitting Office: BALTIMORE

☐ Being Investigated

*Inc should  
have alerted  
this when it  
appeared &  
staff 1 1/2  
later.*

NOV 22 1965

RECORDED COPY FILED IN

FEDERAL BUREAU OF INVESTIGATION

Room 5744 11/4, 1965

TO:

✓ Director	Mr. Tolson
Mr. Belmont	Mr. Belmont
Mr. Mohr	Mr. Mohr
Mr. DeLoach	Mr. DeLoach
Mr. Gale	Mr. Casper
Mr. Rosen	Mr. Callahan
Mr. Callahan	Mr. Conrad
Mr. Casper	Mr. Felt
Mr. Conrad	Mr. Gale
Mr. Felt	Mr. Rosen
Mr. Sullivan	Mr. Sullivan
Mr. Tavel	Mr. Tavel
Mr. Trotter	Mr. Trotter
Mr. Clayton	Tele. Room
Miss Gandy	Miss Holmes
Miss Holmes	Miss Gandy
Personnel Files Section	
Records Branch	
Mrs. Skillman	
Mrs. Brown	
John Quander	

D.C. Morr. LL

See Me For appropriate action  
Send File Note and Return  
Please Call Me

This is the Agent who wrote the

memorandum concerning the

University of Maryland. *Certainly*

*his deductions were un-  
sound & inaccurate &  
did not present a true  
picture.*

Clyde Tolson

NOT RECORDED-2

THREE

1 DEC 7 1965





**UNITED STATES DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION**

*In Reply, Please Refer to  
File No.*

Director  
Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C. 20535

Dear Sir:

For inclusion in the fund to be paid to the designated beneficiary of any Special Agent of the FBI who has previously contributed to this fund and who dies from any cause except self-destruction while employed as a Special Agent, I am forwarding herewith (by Check - Money Order) the sum of \$10, payable to S.A.I.F., to be included in said fund. Payment will be made for death by self-destruction after the Agent has been a member of the fund for a continuous period of two years. It is understood and agreed that the sum tendered herewith is a voluntary, gratuitous contribution to said fund which I understand is to be administered in the following manner.

The Director of the FBI will appoint a committee which shall consider all matters pertaining to the acquisition, safe keeping and expending of said fund, which committee will recommend appropriate action to the Director in pertinent matters. The Assistant Director of the Administrative Division of the FBI shall receive all contributions and account for same to the Director. Upon the death of any Special Agent who is a member of said fund the appointed committee will consider the case and submit a recommendation to the Director as to its conclusions. Appropriate instructions will then be issued to the Assistant Director of the Administrative Division, directing him to pay to the designated beneficiary the sum of \$10,000. The liability of the fund shall not under any circumstances exceed the amount of monies in the fund at the time any liability shall occur.

**EXECUTE IN DUPLICATE AND SUBMIT BOTH COPIES TO THE BUREAU**

Official Bureau Name (please type or print)	Date	Office of Assignment (or SOG Division)
SA Donald C. Morrell	5-20-65	Crime Records Division

The following person is designated as my beneficiary for Special Agents Insurance Fund:

Name (primary beneficiary; use given first name if female)	Relationship
Mrs. Elizabeth Hammer Morrell	Wife

Address

5516 Charlcote Road, Bethesda, Maryland

Name (contingent beneficiary, if desired; use given first name if female)	Relationship
[Redacted]	Son and Daughter

Address

b6 -  
b7C

Do you desire to designate the above-listed beneficiaries as the beneficiary and contingent beneficiary respectively of the Chas. S. Ross Fund as well? ☒ Yes ☐ No If not, the entire following portion must be executed.

The following person is designated as my beneficiary under the Chas. S. Ross Fund providing \$1500 death benefit to beneficiary of agents killed in the line of duty, other than travel accidents.

Name (primary beneficiary; use given first name if female)	Relationship

Address

Name (contingent beneficiary, if desired; use given first name if female)	Relationship

Address

Very truly yours,

*Donald C. Morrell*  
Special Agent

Special Agent in Charge

J. Edgar Hoover

RECEIPT FOR GOVERNMENT PROPERTY  
FEDERAL BUREAU OF INVESTIGATION  
UNITED STATES DEPARTMENT OF JUSTICE

Date

12/7/65I certify that I have ☐ received ☐ returned the following Government property for official use:✓ NEW TIME AND ATTENDANCE MANUAL # 311  
11-16-65

RETURNED

✓ OLD TIME AND ATTENDANCE MANUAL # 297  
8-1-60*Destroyed in Pro. Section*  
12-7-65  
*fi*

## READ

The Government property which you hereby acknowledge is charged to you and you are responsible for taking care of it and returning it when its use has been completed.

DO NOT MARK OR WRITE ON IT OR MUTILATE IT IN ANY WAY.

Very truly yours,

(Signature)

*Donald C. Morrell*

(Typed name)

Donald C. Morrell

UNITED STATES GOVERNMENT

# Memorandum

TO : Mr. DeLoach

DATE: 11-29-65

FROM : D. C. Morrell *DCM*

SUBJECT: CORRESPONDENCE MATTER

Tolson \_\_\_\_\_  
Belmont \_\_\_\_\_  
Mohr \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

In connection with the acknowledgment of a 1966 calendar-book entitled "Looking Back & Looking Ahead" published by Francois L. Schwarz, Inc., received at the Bureau in an envelope bearing the return address of Defense Supply Association here in Washington, D. C., the Director has inquired: "Why has it taken so long to acknowledge this? H"

b6  
b7C

The publication was received in Mr. Tolson's Office at 5:36 p.m., on November 22, 1965, and was stamped in the Crime Records Division at 9:49 a.m., on November 23, 1965. An hour later it was received in the Correspondence and Tours Section and was assigned promptly for reply. Since the envelope forwarding the publication merely indicated "Defense Supply Association, 1026 17th Street, N. W., Washington, D. C.," files were checked to determine if anyone in previous years had sent a similar publication so that an appropriate reply could be sent to that individual. The references to the Defense Supply Association were reviewed by the File Review Unit of the Files and Communications Division. [redacted] Research Clerk, was advised by File Review that the files did not indicate receipt of a similar publication previously but that there had been cordial correspondence with Major General H. Feldman, USA (Retired), Executive Vice President of the Defense Supply Association. Based on this information, Special Agent [redacted] dictated a reply to General Feldman. In view of the short deadline prior to the Thanksgiving day holiday on 11-24-65, the mail was dated for Friday, November 26. When this communication was received in Mr. Tolson's Office on Friday, it was returned with the comment that [redacted] was the individual who had forwarded the publication. The letter was returned at 3:11 p.m., on Friday, was promptly redone to direct it to [redacted] and was returned to Mr. Tolson's Office. In view of the late afternoon hour, it was dated for the following workday, Monday, November 29. It was received in finished form in the Director's office at 5:40 p.m., Friday, November 26, 1965.

## RECOMMENDATION:

For information.

- 1 - Mr. DeLoach
- 1 - Mr. Tavel

GEM:ems (4)

DEC 16 1965

REC-144

10 DEC 13 1965

*There seems to be a lot of loose motion here. I've felt look into it.*

CORRESP

UNITED STATES GOVERNMENT

# Memorandum

TO : MR. TOLSON

DATE: December 2, 1965

FROM : W. M. FELT

SUBJECT: CORRESPONDENCE MATTER

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Wick \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

*Mr. H. Dona K.C.*  
D. C. Morrell memo to Mr. DeLoach, 11/29/65 (attached) replied to the Director's inquiry as to why it had taken so long to acknowledge receipt of 1966 calendar book entitled, "Looking Back and Looking Ahead." The Director noted, "There seems to be a lot of loose motion here. Have Felt look into it."

## BACKGROUND:

Publication received Mr. Tolson's Office at 5:36 PM, Monday, November 22, 1965, and stamped in Crime Records Division 9:49 AM, Tuesday, November 23. There was no cover letter and a file review was conducted to identify sender who was mistakenly identified as Major General H. Feldman, USA (Retired), Executive Vice President of the Defense Supply Association. Letter of acknowledgment was received in Mr. Tolson's Office on Friday, November 26, when it was returned with the instruction that [redacted] had forwarded the publication. Letter was redone and was dated for Monday, November 29.

## INQUIRY BY INSPECTOR:

According to Section Chief D. C. Morrell, Crime Records handled matter pursuant to regulations and procedures now in effect. Letter would have gone out Friday, 11/26/65, had it been properly addressed. Examination of correspondence index in Crime Records reflects no cross-reference to show connection between [redacted] and "Defense Supply Association," the company name on the envelope. The card for [redacted] shows he is associated with this agency.

## OBSERVATIONS:

Obviously there was excessive delay in handling this acknowledgment. Complete indexing in Crime Records Division would have prevented this delay. There is no regulation requiring cross-indexing in these indices. However, in view of the known high regard in which [redacted] holds the Director and the Bureau and in view of the services he has rendered, a cross-index card should have been prepared.

It is not possible to fix specific responsibility now as to who handled this indexing; however, [redacted] has over-all supervisory responsibility.

1 - Mr. Callahan  
RCH:wmj (4)

CONTINUED - OVER

PER. REC. UNIT

Memo for Mr. Tolson  
Re: Correspondence Matter

RECOMMENDATIONS:

1. That D. C. Morrell be censured for his over-all supervisory responsibility for his Section's operations which permitted excessive delay and possible embarrassment to the Bureau. If approved, the Administrative Division will handle.

*nk*

*OK.*  
*K.*

*✓*

*2*

2. That in connection with the inspection of the Crime Records Division to start Monday, December 6, 1965, the current procedures and regulations for handling correspondence, including indexing of names, be thoroughly examined in an effort to tighten up the over-all handling of such matters.

*nk*

*✓*

*How*

*year.*  
*X*

*2*

*✓*  
*Mr. Tolson*  
*Mr. DeLoach*  
*Mr. Mohr*  
*Mr. Casper*  
*Mr. Callahan*  
*Mr. Conrad*  
*Mr. Felt*  
*Mr. Gale*  
*Mr. Rosen*  
*Mr. Sullivan*  
*Mr. Tavel*  
*Mr. Trotter*  
*Mr. Tele. Room*  
*Miss Holmes*  
*Miss Gandy*  
*✓*

*Mr. Morrell, Donald C.*

MR. TOLSON

What I can't understand about this whole thing is that when the letter arrived in your office addressed to General Feldman I called Mr. Morrell's Office. He was on leave but I was advised, in response to my inquiry as to why the letter wasn't addressed to [redacted] that there was an address label showing the book was received from General Feldman. I specifically asked if it showed his return address as the Army and Navy Club or the Defense Supply Association and I was advised it showed his address as Defense Supply Association.

When I commented that you had written [redacted] to thank him for the book I was informed that since the address label showed General Feldman and files showed General Feldman had been written in previous years they thanked General Feldman.

REC-144 67-1171042-1772  
In calling [redacted] at your instructions, he advised that he sent the books each year, not General Feldman.

If I had been furnished correct information, there would not have been any delay until November 29th.

10 DEC 13 1965  
LCB

CORRESPONDENCE

REC-144 67-1171042-1772

b6  
b7C

EC-144

December 6, 1965

PERSONAL

Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

DEC 6 2 41 PM '65  
FBI  
FBI-READING ROOM

Dear Mr. Morrell:

An inquiry has been conducted into the delayed and improper handling of an outgoing communication acknowledging receipt of a book from [redacted] and it has been determined that the Correspondence and Tours Section was definitely at fault. If there had been proper indexing in your section, this excessive delay would have been avoided.

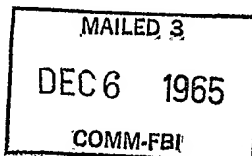
b6  
b7c

As Chief of the Correspondence and Tours Section, it was your responsibility to insure that matters of this nature are taken care of promptly and without embarrassment to the Bureau. This incident indicates a failure on your part in this regard and you will be expected to take immediate steps to prevent any recurrence.

Very truly yours,

J. Edgar Hoover

John Edgar Hoover  
Director



1 - Mr. Wick (Personal Attention)

✓  
JAN 2 1966

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Wick \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

1 - Crime Records Division Personnel File

Based on W. M. Felt to Mr. Tolson memo, 12/2/65, RCH:wmj.

JIC:ped (5)

34

MAIL ROOM ☐ TELETYPE UNIT ☐

Name: Donald C. Morrell

Title: Special Agent

EOD: 8-18-47

Grade: GS-15, \$18,825

Veteran

Not on probation

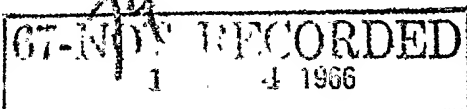
ASSISTANT DIRECTOR:

Mr. Morrell has very capably discharged the duties of Section Chief of the Correspondence and Tours Section since March 14, 1960. He has a most affable personality and outstanding personal appearance. He has performed admirably as an administrator and has furnished excellent leadership and direction to his subordinates, particularly in periods of extremely heavy workload and high tension. His enthusiasm, ingenuity and skill in meeting crises and deadlines have won for him the respect and full cooperation of his associates. Since the last inspection, he, together with the personnel of his Section, have been commended for their valuable contributions in two major projects and he has received one letter of censure for a correspondence review error. His performance rating on 3-31-65 was "Excellent." In addition to devoting himself completely to his numerous responsibilities, he has freely and willingly contributed his time and efforts to the programs of the Special Agents Mutual Benefit Program with notable success.

Rating: Excellent

CRIME RECORDS DIVISION INSPECTION  
December 8, 1965  
REW:mjl

See Inspector's Comments Page Two.



10-2  
3510 ✓



*nl* INSPECTOR

(RCH:bhg, 12/20/65)

Inspector concurs in comments of  
Assistant Director regarding  
Mr. Morrell's appearance,

b6  
b7c

personality and enthusiasm. He appears to exercise good judgment in handling the many short deadline matters in his section. He has earned the loyalty and full cooperation of his subordinates. Mr. Morrell is completely qualified to handle the Correspondence and Tours Section and has the potential to assume additional administrative responsibilities.

*2*

# FEDERAL BUREAU OF INVESTIGATION

NAME: LAST, FIRST, MIDDLE	SOCIAL SECURITY NUMBER
	1 - 1 - 01

## NOTIFICATION OF BASIC CHANGE

CODE - NATURE OF ACTION		EFFECTIVE DATE	DATE OF LAST EQUIV. INCR.
<input type="checkbox"/> 892 - QUALITY INCREASE	<input type="checkbox"/> 896 - ADMIN. PAY INCREASE		
<input type="checkbox"/> 893 - WITHIN GRADE INCREASE	<input type="checkbox"/> 897 - ADMIN. PAY DECREASE		
<input type="checkbox"/> 894 - PAY ADJUSTMENT	OTHER (SPECIFY IN REMARKS)		
GRADE OR LEVEL	STEP OR RATE	OLD SALARY	NEW SALARY

## DATA ON UNPAID ABSENCE

PERIOD(S)	TOTAL EXCESS	IN PAY STATUS AT END OF WAITING PERIOD	INITIALS
			<i>3/20</i>

☐

EMPLOYEE'S WORK IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.

☐

EMPLOYEE'S PERFORMANCE RATING IS SATISFACTORY OR BETTER.

REMARKS:

67-NOT RECORDED  
27 DEC 9 1965

13 DEC 14 1965

*J. Edgar Hoover*

JOHN EDGAR HOOVER  
DIRECTOR

11/24/65  
(DATE)

PERSONNEL FILE COPY

January 18, 1966

PERSONAL

Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Morrell:

A recent letter to [redacted] which was prepared in your section contained a statement which was incorrect. This mistake was inexcusable and was due to negligence on the part of the preparer.

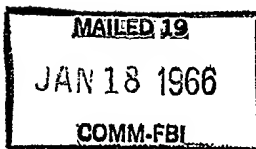
b6  
b7c

Since you reviewed and approved the communication, you were also at fault in not having discovered the error and not having taken appropriate action to have it corrected. In the future, you should give closer attention to such correspondence so that there will be no recurrence of such a delinquency.

Very truly yours,  
J. Edgar Hoover

REC-138

John Edgar Hoover  
Director



- 1 - Mr. Wick (Personal Attention)  
1 - Crime Records Division Personnel File

JIC:skd

(5)

Based on memo D. C. Morrell to Wick, 1-14-66, DCM:mel.

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Wick \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

MAIL ROOM ☐ TELETYPE UNIT ☐

RECEIPT FOR GOVERNMENT PROPERTY  
FEDERAL BUREAU OF INVESTIGATION  
UNITED STATES DEPARTMENT OF JUSTICE

Date 12/7/65

I certify that I have ☒ received ☐ returned the following Government property for official use:

key to upper portion of door B-634 ✓

(Key to set for B-634)

FILE

31 gcw

READ

The Government property which you hereby acknowledge is charged to you and you are responsible for taking care of it and returning it when its use has been completed.

DO NOT MARK OR WRITE ON IT OR MUTILATE IT IN ANY WAY.

Very truly yours,

(Signature)

Donald C. Morrell

(Typed name)

Donald C. Morrell

8 JAN 31 1966

145

UNITED STATES GOVERNMENT

# Memorandum

*file*

100-03-80,19

TO : Director, FBI

DATE: 1-18-66

FROM : SA DONALD C. MORRELI  
(Name of employee)

SECTION CHIEF  
(Title)

Attention: Movement Unit

SUBJECT: OFFICES OF PREFERENCE

Please list my offices of preference as follows:

1. Seat of Government - 3940

2. -----

3. -----

67-NOT RECORDED  
6 JAN 26 1966

JAN 24 1966

January 31, 1966

Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

Dear **Mr. Morrell:**

It is a pleasure to commend you for the outstanding attitude you exhibited in reporting for duty today despite extremely hazardous travel conditions.

You demonstrated a sincere devotion to duty in considering your services so essential that in spite of an announcement that all Federal Government agencies would be closed you reported for duty. I do not want the opportunity to pass without advising you of my appreciation and that I have instructed that a copy of this letter be placed in your personnel file.

Sincerely yours,

*J. Edgar Hoover*

17  
RECEIVED

UNITED STATES GOVERNMENT

# Memorandum

TO : Mr. Wick

DATE: 1-14-66

FROM : D. C. Morrell *DM*

SUBJECT:   
BARDSTOWN, KENTUCKY  
CORRESPONDENCE MATTER

Tolson ☒  
DeLoach ☒  
Mohr ☒  
Bishop ☒  
Callahan ☒  
Conrad ☒  
Felt ☒  
Gale ☒  
Rosen ☒  
Sullivan ☒  
Tavel ☒  
Trotter ☒  
Wick ☒  
Tele. Room ☒  
Holmes ☒  
Gandy ☒

Mr. Tolson has asked for an explanation concerning the handling of correspondence from captioned individual.

Under date 1-6-66 captioned individual wrote the Director advising he planned to be in Washington the next month or so and would look forward to contacting the Director and meeting him personally. He also complimented the Director on receipt of an award as described in the November issue of the Kappa Alpha Journal. A letter and memorandum were prepared by SA Karl L. Stefansson and the letter acknowledged  congratulations on the Director's receipt of the Grand Cross of the Scottish Rite and his best wishes. Mr. Tolson's office returned the letter to make sure the award mentioned in the Kappa Alpha Journal was the Scottish Rite Award.

Thereafter, I questioned Mr. Stefansson as to his handling of this matter and he showed me the checks which had been made. Bureau indices were negative concerning any specific awards covering the pertinent time, the Kappa Alpha files reflected no correspondence regarding any award and there was no record of any receipt of the November issue of the Kappa Alpha Journal at the Bureau. Since Mr. Hoover had received the Grand Cross of the Scottish Rite in October, the month previous to the pertinent issue of the Kappa Alpha Journal, Mr. Stefansson concluded it was that award to which the correspondent referred and so prepared his letter.

I double checked all Bureau records and verified the fact there was no record of any Kappa Alpha award in the Bureau nor any Kappa Alpha Journal available in the Bureau library or in the Bureau. I checked vocational records in the Personnel Section ascertaining the names of three Special Agents who were Kappa Alpha members and personally contacted them. One located a Journal in his home and his wife read the page to me over the phone which indicated that an award had been established in the name of J. Edgar Hoover to be given to five undergraduate chapters of the Order annually, which was the award to which correspondent referred.

I have continually stressed and it is a standing rule that no dictator should place information in a letter he cannot back up in Bureau files or some authoritative source. Mr. Stefansson was at fault in failing to abide by this rule and in reaching the conclusion he did. In reviewing the letter, it appeared logical that from his research he had substantiated the material in his outgoing letter which he had not done. I have care-

1 - Mr. Wick

1 - Mr. Callahan

DM:mel (5)

FEB 4 1966 CONTINUED - OVER

Enclosures

sent 1-18-66

PERSONNEL UNIT

D. C. Morrell to Mr. Wick Memorandum

Re:

b6  
b7C

fully gone over this again with Mr. Stefansson impressing this fact on him and stressing that if he was completely unable to locate the Kappa Alpha Journal through normal research, he could have worded the letter differently rather than making a statement he could not back up.

RECOMMENDATION:

Accordingly, it is recommended that SA Karl L. Stefansson be censured for his handling of this correspondence matter.

*MR. MORRELL AND WICK  
SHOULD ALSO BE  
CENSURED.*

*OK  
1-14-66*

MR. TOLSON

Mr. Wick didn't see it - I understand

*Leinbaugh*  
Mr. Adeock initialed it for him. Shouldn't

*Leinbaugh*  
Mr. Adeock be censured instead of Mr. Wick?

*OK  
1-14*  
LCB

*EMC*

Proposed letters of censure to Leinbaugh, Morrell and Stefansson are attached.



Karl L. Stefansson

Harold P. X Leinbaugh

1/13/66

Mr. Tolson	✓
Mr. DeLoach	✓
Mr. Mohr	✓
Mr. Casper	✓
Mr. Callahan	✓
Mr. Conrad	✓
Mr. Felt	✓
Mr. Gale	✓
Mr. Rosen	✓
Mr. Sullivan	✓
Mr. Tavel	✓
Mr. Trotter	✓
Mr. Wick	✓
Tele. Room	✓
Miss Holmes	✓
Miss Gandy	✓

MEMORANDUM FOR MR. DE LOACH

MR. WICK

MR. MORRELL

D. Phil CS

I have before me a memorandum from Mr. Morrell to Mr. Wick dated 1/13/66. together with an outgoing letter to

[redacted] Bardstown, Kentucky, 40004, acknowledging an incoming letter which congratulated Mr. Hoover on the J. Edgar Hoover award "as described in the November issue of the Kappa Alpha Journal."

b6  
b7C

A memorandum, together with an outgoing letter to [redacted] was received in my office yesterday expressing appreciation for [redacted] kind comments on Mr. Hoover's receipt of the Grand Cross of the Scottish Rite. It was necessary for my office to call Mr. Morrell's Section to ask if a check had been made to make sure the award mentioned in the Kappa Alpha Journal was the Scottish Rite award. [redacted] had the letter picked up from my office and no further word was received as to the accuracy of the letter until I have received the rewritten letter today and it is an award of Kappa Alpha.

Needless to say, if the letter prepared under yesterday's date had gone out it would have been most embarrassing. I would like to have an explanation for this miserable handling of mail.

2/2/66 XEROX  
FEB 4 1966

REC-140

417493-184

31

Clyde Tolson

CT:LCB

6 JAN 25 1966

PERS. REC. UNIT

124

## REPORT OF MEDICAL EXAMINATION

$D, i \neq 8$

**FBI**  
IDENTIFICATION NO.

3. LAST NAME—FIRST NAME—MIDDLE NAME <b>MORRELL, Donald Clark</b>		2. GRADE AND COMPONENT OR POSITION <b>SA</b>		1. IDENTIFICATION NO. <b>101</b>	
4. HOME ADDRESS (Number, street or R.F.D., city or town, zone and State)		5. PURPOSE OF EXAMINATION <b>Annex 1</b>		6. DATE OF EXAMINATION <b>2-15-66</b>	
7. SEX <b>M</b>	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY _____ CIVILIAN _____		10. AGENCY	11. ORGANIZATION UNIT
12. DATE OF BIRTH <b>6-13-18</b>	13. PLACE OF BIRTH <b>Brooklyn, N.Y.</b>		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN		
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS <b>NNMC</b>			16. OTHER INFORMATION		
17. RATING OR SPECIALTY			TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS

## CLINICAL EVALUATION

NOR- MAL	(Check each item in appropriate column; enter "NE" if not evaluated.)	ABNOR- MAL
✓	18. HEAD, FACE, NECK AND SCALP	
✓	19. NOSE	
✓	20. SINUSES	
✓	21. MOUTH AND THROAT	
✓	22. EARS—GENERAL (Int. & ext. canals) (Auditory acuity under items 70 and 71)	
✓	23. DRUMS (Perforation)	
✓	24. EYES—GENERAL (Visual acuity and refraction under items 59, 60 and 67)	
✓	25. OPHTHALMOSCOPIC	
✓	26. PUPILS (Equality and reaction)	
✓	27. OCULAR MOTILITY (Associated parallel movements, nystagmus)	
✓	28. LUNGS AND CHEST (Include breasts)	
✓	29. HEART (Thrust, size, rhythm, sounds)	
✓	30. VASCULAR SYSTEM (Varicosities, etc.)	
✓	31. ABDOMEN AND VISCERA (Include hernia)	
✓	32. ANUS AND RECTUM (Hemorrhoids, fistulae) (Prostate, if indicated)	
✓	33. ENDOCRINE SYSTEM	
✓	34. G-U SYSTEM	
✓	35. UPPER EXTREMITIES (Strength, range of motion)	
✓	36. FEET	
✓	37. LOWER EXTREMITIES (Except feet) (Strength, range of motion)	
✓	38. SPINE, OTHER MUSCULOSKELETAL	
✓	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
✓	40. SKIN, LYMPHATICS	
✓	41. NEUROLOGIC (Equilibrium tests under item 72)	
✓	42. PSYCHIATRIC (Specify any personality deviation)	
	43. PELVIC (Females only) (Check how done)	
	<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

**NOTES.** (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

REC-131

67-421042-174  
Searched \_\_\_\_\_ Indexed \_\_\_\_\_  
4 MAR 30 1966

3/June

(Continue in item 73)

[illegible]

### LABORATORY FINDINGS

45. URINALYSIS: A. SPECIFIC GRAVITY <b>1.023</b>		46. CHEST X-RAY (Place, date, film number and result)	
B. ALBUMIN <b>neg</b>	D. MICROSCOPIC	<b>6492-66 - Normal</b>	
C. SUGAR <b>neg</b>	<b>Pos, Neg. on 2-18-66</b>		
47. SEROLOGY (Specify test used and result)	48. EKG	49. BLOOD TYPE AND RH FACTOR	50. OTHER TESTS
<b>Neg</b>	<b>See Report</b>		<b>CBC - See # 74</b>

Edwin

# MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT 5'7 1/2		52. WEIGHT 157 1/2		53. COLOR HAIR Brown		54. COLOR EYES Blue		55. BUILD: <input type="checkbox"/> SLENDER <input type="checkbox"/> MEDIUM <input checked="" type="checkbox"/> HEAVY <input type="checkbox"/> OBESE				56. TEMPERATURE																														
57. BLOOD PRESSURE (Arm at heart level)								58. PULSE (Arm at heart level)																																		
A. SITTING SYS. 100 DIAS. 68		B. RECUMBENT SYS. DIAS.		C. STANDING (3 min.) SYS. DIAS.		A. SITTING 88		B. AFTER EXERCISE		C. 2 MIN. AFTER		D. RECUMBENT		E. AFTER STANDING 3 MIN.																												
59. DISTANT VISION				60. REFRACTION				61. NEAR VISION																																		
RIGHT 20/ 40		CORR. TO 20/ 20		BY lens		S. OX		24-6		CORR. TO		BY																														
LEFT 20/ 50		CORR. TO 20/ 20		BY lens		S. OX		24-6		CORR. TO		BY																														
62. HETEROPHORIA (Specify distance)																																										
ES°		EX°		R. H.		L. H.		PRISM DIV.		PRISM CONV. CT		PC		PD																												
63. ACCOMMODATION				64. COLOR VISION (Test used and result)				65. DEPTH PERCEPTION (Test used and score)				UNCORRECTED																														
RIGHT LEFT				1940 AOC 13/18								CORRECTED																														
66. FIELD OF VISION				67. NIGHT VISION (Test used and score)				68. RED LENS TEST				69. INTRAOCULAR TENSION																														
70. HEARING				71. AUDIOMETER								72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)																														
RIGHT WV 15 /15 SV 15 /15				<table border="1"> <tr> <td></td> <td>250 250</td> <td>500 512</td> <td>1000 1024</td> <td>2000 2048</td> <td>3000 2896</td> <td>4000 4096</td> <td>6000 6144</td> <td>8000 8192</td> </tr> <tr> <td>RIGHT</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>LEFT</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>									250 250	500 512	1000 1024	2000 2048	3000 2896	4000 4096	6000 6144	8000 8192	RIGHT									LEFT												
	250 250	500 512	1000 1024	2000 2048	3000 2896	4000 4096	6000 6144	8000 8192																																		
RIGHT																																										
LEFT																																										

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

13.0 HGB 3 EOS%  
41 HCT% 3 BASO%  
3.2 WBC 5 MONO%  
55 NEUT%  
34 LYMPH%

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

CBC - SEE # 74

77. EXAMINEE (Check)

A. ☒ IS QUALIFIED FOR  
B. ☐ IS NOT QUALIFIED FOR

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

79. TYPED OR PRINTED NAME OF PHYSICIAN

Thomas V. Inglesby

SIGNATURE

Thomas V. Inglesby

80. TYPED OR PRINTED NAME OF PHYSICIAN

SIGNATURE

81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)

SIGNATURE

82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY

SIGNATURE

NUMBER OF ATTACHED SHEETS

# REPORT OF MEDICAL HISTORY

89-103

THIS INFORMATION IS FOR OFFICIAL USE ONLY AND WILL NOT BE RELEASED TO UNAUTHORIZED PERSONS

1. LAST NAME—FIRST NAME—MIDDLE NAME <u>MORRELL DONALD C.</u>			2. GRADE AND COMPONENT OR POSITION <u>FBI</u>		3. IDENTIFICATION NO.	
4. HOME ADDRESS (Number, street or RFD, city or town, zone and State) <u>5516 CHARLCOTE ROAD BETHESDA, MD.</u>			5. PURPOSE OF EXAMINATION <u>ANNUAL PHYSICAL</u>		6. DATE OF EXAMINATION <u>2-15-66</u>	
7. SEX <u>M</u>	8. RACE <u>W</u>	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY _____ CIVILIAN _____		10. AGENCY <u>FBI</u>	11. ORGANIZATION UNIT	
12. DATE OF BIRTH <u>6-13-18</u>		13. PLACE OF BIRTH <u>BROOKLYN, N. Y.</u>		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN <u>ELIZABETH H. MORRELL, WIFE</u> <u>SAME</u>		
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS				16. OTHER INFORMATION		

17. STATEMENT OF EXAMINEE'S PRESENT HEALTH IN OWN WORDS. (Follow by description of past history, if complaint exists)

Good - ANEMIA DURING 1965 - TAKING IRON  
CYST REMOVED RT. INDEX FINGER 1965

18. FAMILY HISTORY					19. HAS ANY BLOOD RELATION (Parent, brother, sister, other) OR HUSBAND OR WIFE:			
RELATION	AGE	STATE OF HEALTH	IF DEAD, CAUSE OF DEATH	AGE AT DEATH	YES	NO	(Check each item)	RELATION(S)
FATHER			<u>Cor. - O.C.C.</u>	<u>61</u>		<input checked="" type="checkbox"/>	HAD TUBERCULOSIS	
MOTHER	<u>73</u>	<u>Good</u>				<input checked="" type="checkbox"/>	HAD SYPHILIS	
SPOUSE	<u>47</u>	<u>Good</u>				<input checked="" type="checkbox"/>	HAD DIABETES	
BROTHERS AND SISTERS	<u>51</u>	<u>Good</u>				<input checked="" type="checkbox"/>	HAD CANCER	
						<input checked="" type="checkbox"/>	HAD KIDNEY TROUBLE	
					<input checked="" type="checkbox"/>		HAD HEART TROUBLE	<u>Father</u>
						<input checked="" type="checkbox"/>	HAD STOMACH TROUBLE	
CHILDREN		<u>Good</u>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	HAD RHEUMATISM (Arthritis)	
		<u>Good</u>				<input checked="" type="checkbox"/>	HAD ASTHMA, HAY FEVER, HIVES	<u>WIFE</u>
						<input checked="" type="checkbox"/>	HAD EPILEPSY (Fits)	
						<input checked="" type="checkbox"/>	COMMITTED SUICIDE	
						<input checked="" type="checkbox"/>	BEEN INSANE	

20. HAVE YOU EVER HAD OR HAVE YOU NOW (Place check at left of each item)

YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)
<input checked="" type="checkbox"/>		SCARLET FEVER, ERYSIPELAS	<input checked="" type="checkbox"/>		GOITER	<input checked="" type="checkbox"/>		TUMOR, GROWTH, CYST, CANCER	<input checked="" type="checkbox"/>		"TRICK" OR LOCKED KNEE
<input checked="" type="checkbox"/>		DIPHTHERIA	<input checked="" type="checkbox"/>		TUBERCULOSIS	<input checked="" type="checkbox"/>		RUPTURE	<input checked="" type="checkbox"/>		FOOT TROUBLE
<input checked="" type="checkbox"/>		RHEUMATIC FEVER	<input checked="" type="checkbox"/>		SOAKING SWEATS (Night sweats)	<input checked="" type="checkbox"/>		APPENDICITIS	<input checked="" type="checkbox"/>		NEURITIS
<input checked="" type="checkbox"/>		SWOLLEN OR PAINFUL JOINTS	<input checked="" type="checkbox"/>		ASTHMA	<input checked="" type="checkbox"/>		PILES OR RECTAL DISEASE	<input checked="" type="checkbox"/>		PARALYSIS (Inc. infantile)
<input checked="" type="checkbox"/>		MUMPS	<input checked="" type="checkbox"/>		SHORTNESS OF BREATH	<input checked="" type="checkbox"/>		FREQUENT OR PAINFUL URINATION	<input checked="" type="checkbox"/>		EPILEPSY OR FITS
<input checked="" type="checkbox"/>		WHOOPING COUGH	<input checked="" type="checkbox"/>		PAIN OR PRESSURE IN CHEST	<input checked="" type="checkbox"/>		KIDNEY STONE OR BLOOD IN URINE	<input checked="" type="checkbox"/>		CAR, TRAIN, SEA, OR AIR SICKNESS
<input checked="" type="checkbox"/>		FREQUENT OR SEVERE HEADACHE	<input checked="" type="checkbox"/>		CHRONIC COUGH	<input checked="" type="checkbox"/>		SUGAR OR ALBUMIN IN URINE	<input checked="" type="checkbox"/>		FREQUENT TROUBLE SLEEPING
<input checked="" type="checkbox"/>		DIZZINESS OR FAINTING SPELLS	<input checked="" type="checkbox"/>		PALPITATION OR POUNDING HEART	<input checked="" type="checkbox"/>		BOILS	<input checked="" type="checkbox"/>		FREQUENT OR TERRIFYING NIGHTMARES
<input checked="" type="checkbox"/>		EYE TROUBLE	<input checked="" type="checkbox"/>		HIGH OR LOW BLOOD PRESSURE	<input checked="" type="checkbox"/>		VENEREAL DISEASE	<input checked="" type="checkbox"/>		DEPRESSION OR EXCESSIVE WORRY
<input checked="" type="checkbox"/>		EAR, NOSE OR THROAT TROUBLE	<input checked="" type="checkbox"/>		CRAMPS IN YOUR LEGS	<input checked="" type="checkbox"/>		RECENT GAIN OR LOSS OF WEIGHT	<input checked="" type="checkbox"/>		LOSS OF MEMORY OR AMNESIA
<input checked="" type="checkbox"/>		RUNNING EARS	<input checked="" type="checkbox"/>		FREQUENT INDIGESTION	<input checked="" type="checkbox"/>		ARTHRITIS OR RHEUMATISM	<input checked="" type="checkbox"/>		BED WETTING
<input checked="" type="checkbox"/>		CHRONIC OR FREQUENT COLDS	<input checked="" type="checkbox"/>		STOMACH, LIVER OR INTESTINAL TROUBLE	<input checked="" type="checkbox"/>		BONE, JOINT, OR OTHER DEFORMITY	<input checked="" type="checkbox"/>		NERVOUS TROUBLE OF ANY SORT
<input checked="" type="checkbox"/>		SEVERE TOOTH OR GUM TROUBLE	<input checked="" type="checkbox"/>		GALL BLADDER TROUBLE OR GALL STONES	<input checked="" type="checkbox"/>		LAMENESS	<input checked="" type="checkbox"/>		ANY DRUG OR NARCOTIC HABIT
<input checked="" type="checkbox"/>		SINUSITIS	<input checked="" type="checkbox"/>		JAUNDICE	<input checked="" type="checkbox"/>		LOSS OF ARM, LEG, FINGER, OR TOE	<input checked="" type="checkbox"/>		EXCESSIVE DRINKING HABIT
<input checked="" type="checkbox"/>		HAY FEVER	<input checked="" type="checkbox"/>		ANY REACTION TO SERUM, DRUG OR MEDICINE	<input checked="" type="checkbox"/>		PAINFUL OR "TRICK" SHOULDER OR ELBOW	<input checked="" type="checkbox"/>		HOMOSEXUAL TENDENCIES

21. HAVE YOU EVER (Check each item)

<input checked="" type="checkbox"/>	WORN GLASSES	<input checked="" type="checkbox"/>	ATTEMPTED SUICIDE	<input type="checkbox"/>	BEEN PREGNANT	<input type="checkbox"/>	AGE AT ONSET OF MENSTRUATION
<input checked="" type="checkbox"/>	WORN AN ARTIFICIAL EYE	<input checked="" type="checkbox"/>	BEEN A SLEEP WALKER	<input type="checkbox"/>	HAD A VAGINAL DISCHARGE	<input type="checkbox"/>	INTERVAL BETWEEN PERIODS
<input checked="" type="checkbox"/>	WORN HEARING AIDS	<input checked="" type="checkbox"/>	LIVED WITH ANYONE WHO HAD TUBERCULOSIS	<input type="checkbox"/>	BEEN TREATED FOR A FEMALE DISORDER	<input type="checkbox"/>	DURATION OF PERIODS
<input checked="" type="checkbox"/>	STUTTERED OR STAMMERED	<input checked="" type="checkbox"/>	COUGHED UP BLOOD	<input type="checkbox"/>	HAD PAINFUL MENSTRUATION	<input type="checkbox"/>	DATE OF LAST PERIOD
<input checked="" type="checkbox"/>	WORN A BRACE OR BACK SUPPORT	<input checked="" type="checkbox"/>	BLED EXCESSIVELY AFTER INJURY OR TOOTH EXCAVATION	<input type="checkbox"/>	HAD IRREGULAR MENSTRUATION	QUANTITY: <input type="checkbox"/> NORMAL <input type="checkbox"/> EXCESSIVE <input type="checkbox"/> SCANTY	

23. HOW MANY JOBS HAVE YOU HAD IN THE PAST THREE YEARS?

ONE

24. WHAT IS THE LONGEST PERIOD YOU HELD ANY OF THESE JOBS?

MONTHS 1944-1945 FBI AGENT

25. WHAT IS YOUR USUAL OCCUPATION?

26. ARE YOU (Check one)

☒ RIGHT HANDED ☐ LEFT HANDED

67-4-1

174800

YES	NO	CHECK EACH ITEM YES OR NO. EVERY ITEM CHECKED "YES" MUST BE FULLY EXPLAINED IN BLANK SPACE ON RIGHT
		27. HAVE YOU BEEN UNABLE TO HOLD A JOB BECAUSE OF:
✓		A. SENSITIVITY TO CHEMICALS, DUST, SUNLIGHT, ETC.
✓		B. INABILITY TO PERFORM CERTAIN MOTIONS
✓		C. INABILITY TO ASSUME CERTAIN POSITIONS
✓		D. OTHER MEDICAL REASONS (If yes, give reasons)
		28. HAVE YOU EVER WORKED WITH RADIOACTIVE SUBSTANCE?
✓		29. DID YOU HAVE DIFFICULTY WITH SCHOOL STUDIES OR TEACHERS? (If yes, give details)
		30. HAVE YOU EVER BEEN REFUSED EMPLOYMENT BECAUSE OF YOUR HEALTH? (If yes, state reason and give details)
		31. HAVE YOU EVER BEEN DENIED LIFE INSURANCE? (If yes, state reason and give details)
✓		32. HAVE YOU HAD, OR HAVE YOU BEEN ADVISED TO HAVE, ANY OPERATIONS? (If yes, describe and give age at which occurred)
		33. HAVE YOU EVER BEEN A PATIENT (committed or voluntary) IN A MENTAL HOSPITAL OR SANATORIUM? (If yes, specify when, where, why, and name of doctor, and complete address of hospital or clinic)
		34. HAVE YOU EVER HAD ANY ILLNESS OR INJURY OTHER THAN THOSE ALREADY NOTED? (If yes, specify when, where, and give details)
✓		35. HAVE YOU CONSULTED OR BEEN TREATED BY CLINICS, PHYSICIANS, HEALERS, OR OTHER PRACTITIONERS WITHIN THE PAST 5 YEARS? (If yes, give complete address of doctor, hospital, clinic, and details)
		36. HAVE YOU TREATED YOURSELF FOR ILLNESSES OTHER THAN MINOR COLDS? (If yes, which illnesses)
		37. HAVE YOU EVER BEEN REJECTED FOR MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date and reason for rejection)
		38. HAVE YOU EVER BEEN DISCHARGED FROM MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date, reason, and type of discharge: whether honorable, other than honorable, for unfitness or unsuitability)
		39. HAVE YOU EVER RECEIVED, IS THERE PENDING, HAVE YOU APPLIED FOR, OR DO YOU INTEND TO APPLY FOR PENSION OR COMPENSATION FOR EXISTING DISABILITY? (If yes, specify what kind, granted by whom, and what amount, when, why)

5- T&A  
45- Submucous resection 47 cyst removed

Bethesda Naval Hosp 1964 Nasal operation  
Washington Clinic Anemic

I CERTIFY THAT I HAVE REVIEWED THE FOREGOING INFORMATION SUPPLIED BY ME AND THAT IT IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.  
I AUTHORIZE ANY OF THE DOCTORS, HOSPITALS, OR CLINICS MENTIONED ABOVE TO FURNISH THE GOVERNMENT A COMPLETE TRANSCRIPT OF MY MEDICAL RECORD FOR PURPOSES OF PROCESSING MY APPLICATION FOR THIS EMPLOYMENT OR SERVICE.

TYPED OR PRINTED NAME OF EXAMINEE

DONALD C. MORRELL

SIGNATURE

Donald C. Morrell

40. PHYSICIAN'S SUMMARY AND ELABORATION OF ALL PERTINENT DATA (Physician shall comment on all positive answers in items 20 thru 39)

TYPED OR PRINTED NAME OF PHYSICIAN OR EXAMINER

DATE

SIGNATURE

NUMBER OF ATTACHED SHEETS

CLINICAL

PD

EL

ELECTROCARDIOGRAPHIC RECORD

PREVIOUS ECG

CLINICAL IMPRESSION

MEDICATION

☐ EMERGENCY

☐ BEDSIDE

☒ ROUTINE

☒ AMBULANT

AGE 47 SEX M RACE CAUC HT 67 1/2 WEIGHT 158 B. P. SIGNATURE OF WARD PHYSICIAN DATE 2-15-66

RHYTHM AXIS DEVIATION (Q) +60° RATES AURIC. VENT. 50

INTERVALS P WAVES

QRS COMPLEXES

RS-T SEGMENT T WAVES

UNIPOLAR EXTREMITY LEADS (Specify)

PRECARDIAL LEADS (Specify)

1) Sinus bradycardia

SUMMARY, SERIAL CHANGES, AND IMPLICATIONS:  
2) Early repolarization ST segment elevations

3) WITHIN NORMAL LIMITS

NO SIGNIFICANT CHANGE SINCE 3/19/65

(Continue on reverse)

NO. ECG 001584 SIGNATURE [Signature] TITLE DATE 2/15/66

PATIENT'S IDENTIFICATION (For typed or written entries give: Name (last, first, middle; grade; date; hospital or medical facility) REGISTER NO. WARD NO. [Signature]

MORRELL, Donald C.  
SA-FBI

ELECTROCARDIOGRAPHIC RECORD  
Standard Form 520  
GPO: 1961  
HMO: 1961

174/PM

**Attachment to Standard Form 88, Report of Medical Examination  
For Information and Guidance of Medical Examiner**

Name of Examinee  
(Type or print)

Monrell, David D C.

*Last*

*First*

*Middle*

The following portions of the attached examination report form need not be completed:

2	14	68
3	17	69
4	62	72
9	65	76
11	67	

46. Is necessary unless facilities for affording same are not readily available.
48. Not required unless examinee is over 35 years of age or examination indicates such is desirable.
49. Is necessary unless facilities for affording same are not readily available.
71. Audiometer examinations should be afforded whenever possible for all Special Agent applicants and Special Agents. Applicants for the Special Agent position will not be accepted if the hearing loss exceeds a 15 decibel average in either ear in the conversational speech range (500, 1000, 2000 cycles).

**For All Examinees, Whether Clerical or Special Agent Applicants or Employees:**

*The medical examiner should answer the following question:*

Examinee ☒ is ☐ is not qualified for strenuous physical exertion.

**To be Answered in the Case of All Male Employees and Male Applicants:**

1. Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

2. Does examinee have any defects prohibiting safe operation of motor vehicles?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

3. For safe driving of motor vehicles, Civil Service Commission requires distant vision must test at least 20/40 in one eye and 20/100 in the other, corrected or uncorrected. Should examinee wear corrective glasses while operating a motor vehicle? ☒ Yes ☒ No  
If recommendation is based on a factor other than above standard, indicate basis \_\_\_\_\_

ENCLOSURE

67-2-104-174

~~REC'D - ADMIN. DIV.~~  
Desirable Weight Ranges for Males

Height	Small Frame	Medium Frame	Large Frame
5' 4"	117 - 125	123 - 135	131 - 148
5' 5"	120 - 129	126 - 139	134 - 152
5' 6"	124 - 133	130 - 143	138 - 157
5' 7"	128 - 137	134 - 148	143 - 162
5' 8"	132 - 141	138 - 152	147 - 166
5' 9"	136 - 146	142 - 156	151 - 171
5' 10"	140 - 150	146 - 161	155 - 176
5' 11"	144 - 154	150 - 166	160 - 180
6'	148 - 158	154 - 171	164 - 185
6' 1"	152 - 163	158 - 176	169 - 190
6' 2"	156 - 167	163 - 181	174 - 195
6' 3"	160 - 171	168 - 186	178 - 200
6' 4"	169 - 180	178 - 196	188 - 210
6' 5"	174 - 185	182 - 202	192 - 216

REC'D - ADMIN. DIV.  
FBI

4. Examinee's frame is ☐ small ☐ medium ☒ large
5. Considering above weight table, the examinee's frame, and other individual physical characteristics, I consider his present weight ☒ Satisfactory ☐ Excessive ☐ Deficient
6. Under proper medical supervision, examinee should ☐ lose \_\_\_\_\_ pounds  
☐ gain \_\_\_\_\_ pounds

Remarks: \_\_\_\_\_

*Thomas V. Henry, M.D.*  
(Signature of Medical Examiner)

15 Feb. 66.  
(Date)





UNITED STATES DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION

December 15, 1965

Reply, Please Refer to  
File No.

Director  
Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C. 20535

Dear Sir:

For inclusion in the fund to be paid to the designated beneficiary of any Special Agent of the FBI who has previously contributed to this fund and who dies from any cause except self-destruction while employed as a Special Agent, I am forwarding herewith (by Check - Money Order) the sum of \$10, payable to S.A.I.F., to be included in said fund. Payment will be made for death by self-destruction after the Agent has been a member of the fund for a continuous period of two years. It is understood and agreed that the sum tendered herewith is a voluntary, gratuitous contribution to said fund which I understand is to be administered in the following manner.

The Director of the FBI will appoint a committee which shall consider all matters pertaining to the acquisition, safe keeping and expending of said fund, which committee will recommend appropriate action to the Director in pertinent matters. The Assistant Director of the Administrative Division of the FBI shall receive all contributions and account for same to the Director. Upon the death of any Special Agent who is a member of said fund the appointed committee will consider the case and submit a recommendation to the Director as to its conclusions. Appropriate instructions will then be issued to the Assistant Director of the Administrative Division, directing him to pay to the designated beneficiary the sum of \$10,000. The liability of the fund shall not under any circumstances exceed the amount of monies in the fund at the time any liability shall occur.

EXECUTE IN DUPLICATE AND SUBMIT BOTH COPIES TO THE BUREAU

Official Bureau Name (please type or print)	Date	Office of Assignment (or SOG Division)
SA Donald C. Morrell	12/15/65	Crime Records Division
The following person is designated as my beneficiary for Special Agents Insurance Fund:		
Name (primary beneficiary; use given first name if female)	Relationship	
Mrs. Elizabeth H. Morrell	Wife	
Address		
5516 Charlcote Road, Bethesda, Maryland		
Name (contingent beneficiary, if desired; use given first name if female)	Relationship	
[Redacted]	daughter and son	
Address		
[Redacted] ally)		

Do you desire to designate the above-listed beneficiaries as the beneficiary and contingent beneficiary respectively of the Chas. S. Ross Fund as well? ☒ Yes ☐ No If not, the entire following portion must be executed.

The following person is designated as my beneficiary under the Chas. S. Ross Fund providing \$1500 death benefit to beneficiary of agents killed in the line of duty, other than travel accidents.

Name (primary beneficiary; use given first name if female)	Relationship
Mrs. Elizabeth H. Morrell	Wife
Address	
5516 Charlcote Road, Bethesda, Maryland	
Name (contingent beneficiary, if desired; use given first name if female)	Relationship
[Redacted]	daughter and son
Address	
[Redacted] ally)	

Part of the Fund  
Special Agents Insurance Fund

DEC 20 1965

J. Edgar Hoover, Director

Very truly yours,

*Donald C. Morrell*  
Donald C. Morrell

Special Agent

3-ecf

FEDERAL BUREAU OF INVESTIGATION  
UNITED STATES DEPARTMENT OF JUSTICE

## REPORT OF PERFORMANCE RATING

Name of Employee: DONALD C. MORRELL

Where Assigned: Crime Records Correspondence and Tours Section  
(Division) (Section, Unit)

Official Position Title and Grade: Special Agent--Section Chief GS-15

Rating Period: from 4/1/65 to 3/31/66

ADJECTIVE RATING: EXCELLENT Employee's Initials  
Outstanding, Excellent, Satisfactory, Unsatisfactory DCM

Rated by: R. E. Wick Assistant Director 4/1/66  
Signature Title Date

Reviewed by: \_\_\_\_\_  
Signature Title Date

Rating Approved by: [Signature] Assistant Director APR 4 1966  
Signature Title Date

TYPE OF REPORT

☒ Official  
☒ Annual

REG-135

☐ Administrative  
☐ 60-Day  
☐ 90-Day  
☐ Transfer  
☐ Separation from Service  
☐ Special

2

APR 15 1966

3-2/66

# PERFORMANCE RATING GUIDE FOR INVESTIGATIVE PERSONNEL

(For use as attachment to Performance Rating Form No. FD-185)

DONALD C. MORRELL

Special Agent--Section Chief

Name of Employee \_\_\_\_\_ Title \_\_\_\_\_  
Rating Period: from 4/1/65 to 3/31/66

## RATING GUIDE AND CHECK-LIST

Note: Only those items having pertinent bearing on employee's performance should be rated. All employees in same salary grade should be compared.

### RATE ITEMS AS FOLLOWS:

- + Outstanding (exceeding excellent and deserving of special commendation).  
E Excellent.  
✓ Satisfactory (good or very good).  
- Unsatisfactory.  
○ No opportunity to appraise performance during rating period.

### Guide for determining adjective ratings:

- "Outstanding" adjective rating requires (A) that all elements be + and (B) that each and every rated element be factually justified by narrative details, including reasons for considering each worthy of Special Commendation and be attached to FD-185a.
- "Excellent," "Satisfactory" or "Unsatisfactory" adjective ratings will depend upon the composite result of evaluating all rated elements rather than following any mechanical formulas; however, for an employee to be rated "Excellent" he must not be rated unsatisfactory on any performance evaluation factors on the rating guide and check-list and must be rated "Excellent" or "Outstanding" on the majority of such rating factors. Good judgment must be exercised to insure that adjective rating is reasonable in the light of elements rated.
  - Any element rated "Unsatisfactory" must be supported by narrative comments.
  - An official rating of "Unsatisfactory" must be supported in writing stating (1) wherein the performance is unsatisfactory, (2) the facts of the (90-day) prior warning, and (3) the efforts made after the warning to help the employee bring his performance up to a satisfactory level and must be attached to FD-185a.

- |   |   |
|---|---|
| <u>+</u> (1) Personal appearance.   | <u>E</u> (16) Firearms ability.   |
| <u>+</u> (2) Personality and effectiveness of his personal contacts.  | <u>○</u> (17) Development of informants and sources of information.   |
| <u>+</u> (3) Attitude (including dependability, cooperativeness, loyalty, enthusiasm, amenability and willingness to equitably share work load).  | <u>+</u> (18) Reporting ability: <ul style="list-style-type: none"> <li><u>○</u> (a) Investigative reports</li> <li><u>○</u> (b) Summary reports</li> <li><u>+</u> (c) Memos, letters, wires</li> </ul> (Consider: <u>+</u> conciseness; <u>+</u> clarity; <u>+</u> organization; <u>+</u> thoroughness; <u>+</u> accuracy; <u>○</u> adequacy and pertinency of leads; <u>○</u> administrative detail.)   |
| <u>+</u> (4) Physical fitness (including health, energy, stamina).  | <u>○</u> (19) Performance as a witness.   |
| <u>+</u> (5) Resourcefulness and ingenuity.   | <u>+</u> (20) Executive ability: <ul style="list-style-type: none"> <li><u>+</u> (a) Leadership</li> <li><u>+</u> (b) Ability to handle personnel</li> <li><u>+</u> (c) Planning</li> <li><u>+</u> (d) Making decisions</li> <li><u>+</u> (e) Assignment of work</li> <li><u>+</u> (f) Training subordinates</li> <li><u>+</u> (g) Devising procedures</li> <li><u>+</u> (h) Emotional stability</li> <li><u>+</u> (i) Promoting high morale</li> <li><u>+</u> (j) Getting results</li> </ul> |
| <u>+</u> (6) Forcefulness and aggressiveness as required.   | <u>○</u> (21) Ability on raids and dangerous assignments: <ul style="list-style-type: none"> <li><u>○</u> (a) As leader</li> <li><u>+</u> (b) As participant</li> </ul>   |
| <u>+</u> (7) Judgment, including common sense, ability to arrive at proper conclusions, ability to define objectives.   | <u>+</u> (22) Organizational interest, such as making of suggestions for improvement.   |
| <u>+</u> (8) Initiative and the taking of appropriate action on own responsibility.   | <u>+</u> (23) Ability to work under pressure.   |
| <u>+</u> (9) Planning ability and its application to the work.  | <u>+</u> (24) Miscellaneous. Specify and rate: <ul style="list-style-type: none"> <li><u>+</u> Dictation ability</li> </ul>   |
| <u>E</u> (10) Accuracy and attention to pertinent detail.   |   |
| <u>+</u> (11) Industry, including energetic, consistent application to duties.  |   |
| <u>+</u> (12) Productivity, including amount of acceptable work produced and rate of progress on or completion of assignments. Also consider adherence to deadlines unless failure to meet is attributable to causes beyond employee's control.   |   |
| <u>+</u> (13) Knowledge of duties, instructions, rules and regulations, including readiness of comprehension and "know how" of application.   |   |
| <u>○</u> (14) Investigative ability and results: <ul style="list-style-type: none"> <li><u>○</u> (a) Internal security cases</li> <li><u>○</u> (b) Criminal or general investigative cases</li> <li><u>○</u> (c) Fugitive cases</li> <li><u>○</u> (d) Applicant cases</li> <li><u>○</u> (e) Accounting cases</li> </ul> |   |
| <u>○</u> (15) Physical surveillance ability.  |   |

- A. Specify general nature of assignment during most of rating period (such as security, criminal, applicant squad, or as Resident Agent, supervisor, instructor, etc.): \_\_\_\_\_

## Section Chief--Correspondence and Tours Section

- B. Specify employee's most noteworthy special talents (such as investigator, desk man, research, instructor, speaker): \_\_\_\_\_

## Desk Man, Lecturer

- C. (1) Is employee available for general assignment wherever needs of service require? Yes (If answer is not "yes," explain in narrative comments.)  
 (2) Is employee available for special assignment wherever needs of service require? Yes (If answer is not "yes," explain in narrative comments.)

- D. 1. Has employee had an abnormal sick leave record during rating period? No 2. Has employee used more sick leave (including annual leave or LWOP for illness) during rating period than the amount of sick leave earned during such period? No (If answer to either question is "yes," explain in narrative comments.)

- E. Is employee qualified to operate a motor vehicle incidental to his official duties? ☒ Yes ☐ No  
 If answer is "yes," personnel file must reflect the following: (a) Has valid State or local operator's license for type vehicle he is to use.  
 (b) Is physically fit to drive. (c) Past safe-driving record OK or has passed Bureau road test.

ADJECTIVE RATING:

EXCELLENT

EMPLOYEE'S INITIALS

Outstanding, Excellent, Satisfactory, Unsatisfactory

DM

## NARRATIVE COMMENTS

1. PERSONAL APPEARANCE AND PERSONALITY:

He has an outstanding personal appearance, being neatly attired and well groomed at all times. His affable personality and enthusiastic approach are especially valuable, both in his supervisory and liaison assignments.

2. ABILITY TO PARTICIPATE IN RAIDS AND DANGEROUS ASSIGNMENTS:

N. A.

3. LIMITATIONS ON AVAILABILITY; PHYSICAL LIMITATIONS AFFECTING PERFORMANCE; AND SICK LEAVE INFORMATION:

There are no limitations on his availability; his sick leave record is excellent and there are no physical limitations affecting his performance of duty.

4. TYPE OF CASES OR WORK HANDLED AND APPRAISAL OF OVER-ALL PERFORMANCE, INCLUDING ABILITY TO HANDLE COMPLICATED INVESTIGATIVE MATTERS AND SUPERVISION REQUIRED:

During the rating period he served as the Section Chief of the Correspondence and Tours Section, and he has performed as an administrative leader in an outstanding manner, furnishing keen guidance to his subordinates and dedicated efforts in overcoming insurmountable handicaps, extremely heavy work loads and numerous periods of prolonged emergency projects.

Under his supervision are three Units in the Section, including two Correspondence Units and one Tour Unit. During 1965 there was an all-time record for tours when no less than 622,144 persons visited the Bureau. Likewise, a near record was set in regard to correspondence in 1965 when a total of 73,815 pieces of outgoing correspondence were recorded. The primary responsibility in this Section is the review and response to the enormously huge volume of correspondence addressed to the Director, and Mr. Morrell has performed an outstanding service in his supervision of this major responsibility. Mr. Morrell is competent to handle any complex assignment, and has the versatility to participate in any of the specialized work in this Division.

In addition to his regular assignments as Section Chief, this Agent handles responsibilities as a representative of the Bureau in the Special Agents Mutual Benefits Association, in which capacity he has personally been responsible for achieving many benefits for FBI employees. He is also active in the affairs of the FBI Recreation Association. His skill and efforts contribute in large measure to the successful operations of this Division and he is a definite asset in his present capacity as Section Chief.

*DM*  
Initials

5. NUMBER OF INCENTIVE AWARDS AND COMMENDATIONS RECEIVED:

By letter dated 5-5-65 he and members of his Section were commended for the Bureau's part in connection with the "Early Bird" telecast. By letter dated 1-31-66 he was commended for reporting for duty despite extremely hazardous travel conditions.

6. DISCIPLINARY ACTION AND JUSTIFICATION FOR ANY UNSATISFACTORY ITEMS:

(List items taken into consideration on rating guide and check list.)

He was criticized by letter dated 12-6-65 in regard to a delay in a piece of outgoing correspondence, and by letters dated 5-19-65 and 1-18-66 regarding review mistakes in pieces of outgoing correspondence, which were corrected before being sent out.

7. PARTICIPATION IN INFORMANT PROGRAMS:

N. A.

8. TESTIFYING EXPERIENCE AND ABILITY:

N. A.

9. ACCOUNTING INFORMATION:

N. A.

10. POLICE INSTRUCTION:

N. A.

11. RESIDENT AGENTS:

N. A.

OCW  
Initials

12. EXPERIENCE AND ABILITY AS INSPECTOR'S AIDE:

Mr. Morrell is a qualified Inspector's Aide, but his important responsibilities as a Section Chief during the rating period precluded his use on such assignment.

13. FOREIGN LANGUAGE ABILITY:

Language in which proficient None

Completed language school ☐ Yes ☐ No

Fluent in \_\_\_\_\_ language to extent Agent can handle typical investigative problems as follows: (1) Conversation form ☐ Yes ☐ No

(2) Written form ☐ Yes ☐ No

Evaluate language proficiency in each phase as excellent, very good, good, fair or unsatisfactory

Language

Read

Write

Speak

Understand

Spanish

Unsatisfactory

Frequency \_\_\_\_\_ language ability used during rating period:

Frequency of use of \_\_\_\_\_ language ability anticipated during ensuing year:

14. ADMINISTRATIVE ADVANCEMENT:

(a) Agent is interested in administrative advancement. ☒ Yes ☐ No

(b) Agent is completely available for administrative advancement. ☒ Yes ☐ No

(c) Agent is considered completely qualified at present for administrative advancement, including experience, ability, personality and appearance. ☒ Yes ☐ No

(d) If answer to (c) is "Yes," Agent's qualifications are considered  
☐ very good ☒ excellent ☐ outstanding

(e) If answer to (c) is "No," is Agent considered to have potential for future administrative advancement? (If applicable, explanatory comments required.) ☐ Yes ☐ No

Jem  
Initials

UNITED STATES GOVERNMENT

# Memorandum

TO : Mr. DeLoach *PR*

FROM : R. E. Wick

SUBJECT: DEATH OF HYMAN PEARLSTONE  
CORRESPONDENCE MATTER

DATE: 5/6/66

*Handwritten signature*

Tolson	_____
DeLoach	_____
Mohr	_____
Wick	_____
Casper	_____
Callahan	_____
Conrad	_____
Felt	_____
Gale	_____
Rosen	_____
Sullivan	_____
Tavel	_____
Trotter	_____
Tele. Room	_____
Holmes	_____
Gandy	_____

*Handwritten signature*

On 5/2/66 a telegram was received from the Hyman Pearlstone Family indicating the death of Mr. Pearlstone. A letter was prepared on the same date to the widow and returned from Mr. Tolson's office as we had previously been advised that Mrs. Pearlstone had died in 1962. The letter had been dictated by Section Chief Donald C. Morrell.

*Handwritten: Helen P. file*

On receipt of the telegram it was assigned for research to [redacted] Correspondence Clerk, grade GS-6, and [redacted] Research Assistant, grade GS-9. [redacted] checked the Special Correspondents' List and determined there were a series of mailing list cards stapled together pertaining to Mr. Pearlstone. Only the top, or current, card was checked. However, an old card stapled to this card indicated that Mrs. Pearlstone had died in 1962, but [redacted] failed to go beyond looking at the top card. She is considered at fault for this.

b6  
b7c

**REC-136** **61-421042-176**

[redacted] did the file check on this matter and put the search in the hands of the File Review Unit, explaining that Mr. Pearlstone was a friend of the Director's and had just died. Since the current "Who's Who" reflects Mr. Pearlstone was married and had several children, [redacted] asked File Review to check for any references to Mrs. Pearlstone to indicate whether she was living or dead. File Review reported back later advising that the last reference to Mrs. Pearlstone was in a letter from Mr. Pearlstone dated 1961, at which time she was alive. There was no indication in Mr. Pearlstone's file that his wife had died. [redacted] failed to make any check of Mr. Tolson's office and did not check the staff Christmas card list or other material in the Director's office with regard to the status of Mrs. Pearlstone but jumped to the conclusion that the latter was alive because there was nothing in

1 - Mr. Tolson  
1 - Mr. DeLoach

REW:mls  
(4) *PR*

**MAY 20 1966**

Enclosures (2)

CONTINUED - OVER

*Handwritten: XEROX, MAY 20 1966, 5-11-66, HHC: [unclear], HMB: [unclear]*

*Handwritten: HMB*

Wick to DeLoach memo, 5/6/66  
RE: DEATH OF HYMAN PEARLSTONE

Mr. Pearlstone's file indicating she had died. [ ] was at fault in not making the additional further indicated checks since data in both the Director's Office and Mr. Tolson's Office shows Mrs. Pearlstone is dead.

b6  
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Memoranda of explanation from [ ] and [ ] are attached.

RECOMMENDATIONS:

(1) That [ ] and [ ] be censured for their ineffective research in this matter.

yes.  
✓

(2) That Section Chief Donald C. Morrell be censured because he dictated the letter to Mrs. Pearlstone on the basis of inadequate research.

✓ yes.  
✓

✓



UNITED STATES GOVERNMENT

# Memorandum

TO : Mr. Morrell *gm*

DATE: 5-2-66

FROM :  *Sm*

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Wick \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

b6  
b7c

SUBJECT: HANDLING OF RESEARCH IN CONNECTION  
WITH LETTER REGARDING DEATH OF  
HYMAN PEARLSTONE

At approximately 10 a.m. on Monday, May 2nd, in the absence of  from the office, I took a file search on Hyman Pearlstone from the Service Unit. Knowing that it was special, I *✓* personally called File Review explaining to them that Mr. Pearlstone was a friend of the Director's and that he had just died. I asked them to check specifically for any references to Mrs. Pearlstone as to whether she was living or dead and if living I wanted to know if the Director knew her personally also. This information was given to  A short while later,  called back and told me the last reference to Mrs. Pearlstone was in a letter from Pearlstone dated 1961 in which he stated she joined him in expressing best wishes to Mr. Hoover. There are no later references to Mrs. Pearlstone in his file. The file did give reference to a grandson and a daughter. "Who's Who" had been checked previously by another clerk who advised me Mr. Pearlstone was married and that his wife's name was Mabel and that they had several children.

SAW:kcf *h* (2)

67-421042-176 *3*

UNITED STATES GOVERNMENT

# Memorandum

TO : Mr. Morrell *Qny*

DATE: 5-2-66

FROM :

SUBJECT: HANDLING OF RESEARCH IN CONNECTION  
WITH LETTER REGARDING DEATH OF  
HYMAN PEARLSTONE

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Wick \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_ b6  
Holmes \_\_\_\_\_ b7C  
Gandy \_\_\_\_\_

On the morning of May 2nd I was asked to check the Bureau mailing list to determine if Mr. Pearlstone was on the Special Correspondents' List. Finding him on, I copied the name and address exactly as it appeared on the top card.

MHB (2)

67-421043-176 *3*

July 12, 1966

Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Morrell:

I want to commend, through you, the personnel in the Correspondence and Tours Section for the exemplary manner in which they have discharged their responsibilities during the past six months.

Their diligent application, efficiency and thoroughness in handling their assignments contributed materially to the noteworthy accomplishments achieved. I was pleased with their superb team effort and with the interest displayed by all and I want you to convey my appreciation to them for their very fine services.

Sincerely yours,

J. Edgar Hoover

1 - Mr. Wick (Personal Attention)

1 -  (Sent Direct)

JAB  
(5)

Based on memo Wick to DeLoach 7/8/66 re Accomplishments of Correspondence and Tours Section, First Six Months of 1966.

MAILED 30

JUL 12 1966

COMM-FBI

MAIL ROOM ☐

TELETYPE UNIT ☐

JUL 12 10 19 AM '66  
REC'D-READING ROOM  
FBI

Olson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Wick \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

REC-136

May 11, 1966

PERSONAL

*File reviewed  
JEP 11-15-66  
Kob*

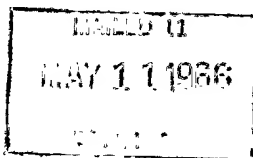
Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Morrell:

You prepared an outgoing communication dated May 2, 1966, which had to be returned since it contained inaccurate information. It has been determined that this error was due to the lack of a sufficiently thorough search of Bureau records and more alertness on your part in handling this assignment could have avoided this undesirable situation.

In the future, you will be expected to discharge your responsibilities in a more effective and thorough manner so that it will not be necessary to again bring such a situation to your attention.

Very truly yours,



J. Edgar Hoover  
John Edgar Hoover  
Director

1 - Mr. Wick (Personal Attention)

1 - Crime Records Division Personnel File

Based on Wick to DeLoach memo, 5/6/66, REW:mls.

HNB:skd/ped (5)

*604*

Folson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Wick \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

MAIL ROOM ☐ TELETYPE UNIT ☐

*2/11/66*  
*[Signature]*  
*[Signature]*

September 20, 1966

Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

SEP 20 3 37 PM '66  
FBI-READING ROOM

Dear Mr. Morrell:

I am taking this occasion to commend, through you, Special Agent William H. Stapleton and the others in the Tour Unit for the very effective manner in which they handled their duties relative to the record number of tours of the Bureau this past summer.

Everyone was very enthusiastic and thorough and, as a result of their efforts, they played a vital role in insuring that thousands of our guests were accommodated. The dedicated services of Mr. Stapleton and those who assisted in presenting the FBI to many tourists are appreciated.

Sincerely yours,  
J. Edgar Hoover

1728

1 - Mr. Wick (Personal Attention)

Copies of this letter are being placed in files of appropriate personnel.

1 - [redacted] (Sent Direct)

KEC:bl  
(11)

Based on memo Morrell-Wick 9/14/66 re: FBI Tours, Summer Season, 1966, Commendatory Matters.

Copies prepared and attached for placing in files of William H. Stapleton, [redacted]

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Wick \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

MAIL ROOM ☐ TELETYPE UNIT ☐

b6  
b7c

August 31, 1966

Mr. Robert E. Wick  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Wick:

I am taking this opportunity to commend, through you, the personnel in the Crime Records Division for the splendid work done in connection with the preparation of comprehensive briefs of interest to the Bureau on a confidential matter.

Everyone demonstrated a high degree of thoroughness, competence and skill in handling individual assignments in this complex and extensive survey and, as a result, contributed much to its expeditious completion. I was particularly pleased with the devotion to duty and enthusiasm demonstrated by all in voluntarily working at much personal inconvenience on this matter. Please convey my sincere appreciation to those who participated.

Sincerely yours,

1 - Mr. Wick (Personal Attention)

Re: Briefs on Microphones and Wire Taps

A copy of this letter is being placed in appropriate personnel files,

1 -  (Sent Direct)

CTP:ej

(23)

Based on memo Smith to Sullivan 8-17-66 and addendum Administrative Division 8-25-66 re Briefs on Microphones and Wire Taps, Administrative Matter.

Copies prepared and attached for placing in following files: OVER

b6  
b7c

Mr. Robert E. Wick

Hobson H. Adcock

David W. Bowers

[REDACTED]

Thomas B. Coll

Robert D. Conger

[REDACTED]

Jerome J. Daunt

James C. Farrington

[REDACTED]

Donald G. Hanning

[REDACTED]

Gordon E. Malmfeldt

✓ Donald C. Morrell

James M. Murphy

[REDACTED]

William H. Stapleton

[REDACTED]

b6  
b7C

UNITED STATES GOVERNMENT

# Memorandum

TO : Mr. Wick

DATE: 10-25-66

FROM : D. C. Morrell *DCM*

SUBJECT: DONALD C. MORRELL  
CORRESPONDENCE AND TOURS SECTION  
PERSONNEL MATTER

*Wick*  
Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Wick \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

On September 12, 1966, my daughter, [ ] age [ ] was driving alone in my personally owned automobile on Hampden Lane in Bethesda, Maryland. It had been raining previously, and she was driving cautiously when she noticed a car coming out of a side street, Midwood Street, coming out into Hampden Lane. [ ] jammed on her brakes, and her car skidded sideways down the Lane with the rear end swinging forward. The other car proceeded into Hampden Lane, and the left rear bumper of my car just grazed the door of the other car which was driven by [ ]. There was no damage to my car and just a slight scratch to [ ] car. [ ] after surveying the situation, said she was in a hurry to get her maid to the bus, and if agreeable with [ ] they would just exchange telephone numbers and talk about it later. Since [ ] was obviously in the wrong, having come through a stop street, and there was no damage to our car, [ ] agreed.

b6  
b7C

I reported this to my insurance company and subsequently received a claim in the amount of \$51.75 from [ ]. I told him I did not expect to pay it as his wife was in the wrong but I would refer it to my insurance company.

Subsequently, my insurance company, State Farm Mutual Automobile Insurance Company, denied [ ] claim and on Monday evening, 10-24-66, I was served with a summons to appear in Montgomery County People's Court at 9:30 a.m. on Monday, November 28, 1966, to answer a suit for debt in the amount of \$51.75 and costs caused by the alleged negligent manner in which my daughter was operating my automobile.

REC-141

CONTINUED - OVER

DCM:kcf (2)

OCT 27 1966

*3/11C*



Memorandum to Mr. Wick  
RE: Donald C. Morrell

My insurance company will defend as neither they nor I have any intention of paying [redacted] since his wife was completely in the wrong in the operation of the automobile. My daughter is presently a senior at Vanderbilt University in Nashville, Tennessee, and we will attempt to arrange a continuance so that the trial can be held at a time when she is normally home for vacation.

b6  
b7C

RECOMMENDATION:

For record purposes.

W  
T38  
Jm  
amr

November 23, 1966

Mr. Donald C. Morrell  
Sibley Memorial Hospital  
5255 Loughboro Road, Northwest  
Washington, D. C. 20016

Dear Morrell:

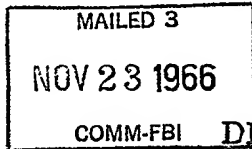
I am sorry that it is necessary for you  
to be hospitalized, and hope it will not be too long  
until you are feeling better.

You should follow closely your physician's  
advice, by no means permitting worry over your work to  
bring about a premature return to duty.

Sincerely,

J. Edgar Hoover

1 - Mr. Wick (Personal Attention)



DLB  
(4)

Special Salutation obtained from Reading Room.

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Wick \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

MAIL ROOM ☐ TELETYPE UNIT ☐



**UNITED STATES DEPARTMENT OF JUSTICE**  
**FEDERAL BUREAU OF INVESTIGATION**

*In Reply, Please Refer to  
File No.*

Director  
Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C. 20535

Dear Sir:

For inclusion in the fund to be paid to the designated beneficiary of any Special Agent of the FBI who has previously contributed to this fund and who dies from any cause except self-destruction while employed as a Special Agent, I am forwarding herewith (by Check - Money Order) the sum of \$10, payable to S.A.I.F., to be included in said fund. Payment will be made for death by self-destruction after the Agent has been a member of the fund for a continuous period of two years. It is understood and agreed that the sum tendered herewith is a voluntary, gratuitous contribution to said fund which I understand is to be administered in the following manner.

The Director of the FBI will appoint a committee which shall consider all matters pertaining to the acquisition, safe keeping and expending of said fund, which committee will recommend appropriate action to the Director in pertinent matters. The Assistant Director of the Administrative Division of the FBI shall receive all contributions and account for same to the Director. Upon the death of any Special Agent who is a member of said fund the appointed committee will consider the case and submit a recommendation to the Director as to its conclusions. Appropriate instructions will then be issued to the Assistant Director of the Administrative Division, directing him to pay to the designated beneficiary the sum of \$10,000. The liability of the fund shall not under any circumstances exceed the amount of monies in the fund at the time any liability shall occur.

**EXECUTE IN DUPLICATE AND SUBMIT BOTH COPIES TO THE BUREAU**

Official Bureau Name (please type or print)	Date	Office of Assignment (or SOG Division)
SA Donald C. Morrell	10-25-66	Crime Records

The following person is designated as my beneficiary for Special Agents Insurance Fund:

Name (primary beneficiary; use given first name if female)	Relationship
Mrs. Elizabeth H. Morrell	Wife

Address b6  
b7C

5516 Charlcote Road, Bethesda, Maryland 20034

Name (contingent beneficiary, if desired; use given first name if female)	Relationship
	Son and Daughter

Address

Do you desire to designate the above-listed beneficiaries as the beneficiary and contingent beneficiary respectively of the Chas. S. Ross Fund as well? ☒ Yes ☐ No If not, the entire following portion must be executed.

The following person is designated as my beneficiary under the Chas. S. Ross Fund providing \$1500 death benefit to beneficiary of agents killed in the line of duty, other than travel accidents.

Name (primary beneficiary; use given first name if female)	Relationship

Address

Name (contingent beneficiary, if desired; use given first name if female)	Relationship

Address

Very truly yours,

*Donald C. Morrell*

Special Agent

Payment Received  
Special Insurance Fund

OCT 31 1966

J. Edgar Hoover, Director

5-ecd

# Memorandum

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Wick \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

DATE: 11/10/66

FROM : R. E. Wick

Under the direction of Special Agent Gordon E. Malmfeldt, Correspondence and Tours Section of this Division, we were able to speedily dispatch yesterday some 135 letters to elected members of the Congress and Senate, as well as Governors, shortly after absolute verification of their election.

The magnitude of this undertaking is realized by the fact 435 Representatives were elected, 35 Senate seats and 35 Governors were filled. This means checking practically double this number and preparing letters to the elected persons. This entailed more than 1,000 checks.

Section Chief Donald C. Morrell. Special Agent Gordon E. Malmfeldt and Stenographer [redacted] the latter doing an outstanding job, were responsible for this fine job.

## RECOMMENDATION

That the above-named employees of the Crime Records Division be commended for their excellent handling of this project.

~~1 - Mr. Tolson~~  
1 - Mr. DeLoach  
1 - Mr. Callahan

REW:mls  
(5) *5.10*

NOV 28 1966

~~SECRET//NOFORN//KATX//KX//KFA//KN//EX//XS//ON//XX//XX//XX//KX//KX~~

Appropriate letters attached

REC-141

November 16, 1966

PERSONAL

Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

NOV 16 10 47 AM '66  
FBI - WASH DC

Dear Morrell:

I am pleased to commend you for  
your effective work in the expeditious prepa-  
ration of a large volume of congratulatory  
letters.

This extensive project was handled  
with exemplary enthusiasm and dispatch and I  
want you to know I am most appreciative of  
your expert leadership.



Sincerely,

J. Edgar Hoover

1 - Mr. Wick (Personal Attention)

1 -   (Sent Direct)

b6  
b7C

LRH:bll

(5)

67-

Based on memo Wick-DeLoach 11/10/66 re: Congratulatory letters,  
Members of Congress and Governors, November 8, 1966, Election.

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Wick \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

MAIL ROOM ☐ TELETYPE UNIT ☐

NOV 22 1966

*[Handwritten signatures and initials]*

UNITED STATES GOVERNMENT

# Memorandum

TO : Mr. Wick

DATE: 11-22-66

FROM : D. C. Morrell *DCM*

SUBJECT: SA DONALD C. MORRELL  
CORRESPONDENCE AND TOURS SECTION  
CRIME RECORDS DIVISION  
HEALTH MATTER

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Wick \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

I have just received word from my physician that he is placing me in the Sibley Memorial Hospital, Washington, D. C., tomorrow, 11-23-66, at 2 p.m. The purpose of this hospitalization is to undergo extensive tests for anemia and the regular internal series. He anticipates I will be released around next Tuesday.

## RECOMMENDATION:

For information.

1 - Mr. Callahan

DCM:kcf *Ref* (3)

REC-13Z

67-121042-181
NOV 28 1966 41

3 NOV 28 1966

3/14

November 27, 1960

Mr. Donald C. Morrell  
Gibley Memorial Hospital  
5255 Loughboro Road, Northwest  
Washington, D. C. 20016

Dear Morrell:

I am sorry that it became necessary for you  
to be hospitalized, and hope it will not be long  
until you are feeling better.

You should follow closely the physician's  
advice, by no means permitting any of your work to  
bring about a premature return to duty.

Sincerely,

1 - Mr. Wick (Personal Attention)

DLB  
(4)

Special Salutation obtained from Reading Room.

1 67-421642-181

## UNITED STATES GOVERNMENT

## Memorandum

TO : ~~XXXXXX~~ Mr. Wick

DATE: 11-28-66

FROM : ~~XXX~~ D. C. Morrell *DCM*

Attention: Personnel Section

SUBJECT: DONALD C. MORRELL  
RETURN FROM SICK LEAVE

Remymemo 11-22-66.

☐ Remylet \_\_\_\_\_  
☐ ReBulet \_\_\_\_\_☐ Re physical examination \_\_\_\_\_  
☐ Dental work was completed on \_\_\_\_\_  
☐ Vision has been corrected to \_\_\_\_\_ Employee specifically instructed  
\_\_\_\_\_ by \_\_\_\_\_ that he can operate a Bureau car  
(date) (name of person giving instruction)

only when wearing the necessary glasses.

☐ Results of ☐ chest X ray ☐ patch test ☐ urinalysis ☐ serology were negative.  
☐ Enclosed physician's statement indicates he is qualified for strenuous physical exertion and use of firearms.  
☐ Enclosed are ☐ paid ☐ unpaid medical bills.  
☐ Attached are Bureau of Employees' Compensation forms \_\_\_\_\_☐ Physical examination reports are enclosed.  
☐ Employee is scheduled for physical examination on \_\_\_\_\_  
☐ Physical examination report has been reviewed and initialed.  
☒ Employee returned to active duty 11-28-66.  
☒ Employee's physical condition is satisfactory.  
☐ UACB he is being removed from limited duty.  
☐ UACB he is being placed on limited duty.

Remarks:

DCM:kcf

*no further action  
jgv  
11-29-66**WTB**11-28-66  
11-29-66**(69)**7/1/66*



Name: Donald C. Morrell

Title: Special Agent

EOD: 8-18-47

Grade: GS-15, \$19,978

Veteran

Not on probation

ASSISTANT DIRECTOR:

Mr. Morrell has been Chief of the Correspondence and Tours Section since March 14, 1960, during which time he has performed in an outstanding manner, furnishing expert guidance to his subordinates and a dedicated effort to the overcoming of many continuing problems such as extremely heavy workloads and numerous prolonged emergency projects. His personal appearance is outstanding; his personality is an affable one; and his approach to his duties is continually enthusiastic. His ingenuity and skill in meeting crises and deadlines have earned for him the respect and full cooperation of his associates. He is completely competent to handle any complex assignment and he is versatile in his participation in any of the specialized work of this Division.

In addition to his regular assignment as Section Chief, Mr. Morrell is the Bureau representative to the Special Agents Mutual Benefits Association and in this capacity he has been personally responsible for obtaining many valuable benefits for FBI employees. He is definitely an asset to this Division.

Since the last inspection he has been commended on three occasions and he has received three letters of censure as a result of correspondence reviewing errors. His performance rating on April 4, 1966 was "Excellent."

Rating: Excellent

See Inspector's Comments Page Two.

CRIME RECORDS DIVISION INSPECTION  
November 28, 1966  
REW:mjm

NOT RECORDED  
DEC 19 1966 56

10-2  
3/10

INSPECTOR   
(GWH:bhg, 12/13/66)

Mr. Morrell makes an excellent appearance, has a friendly personality and indicates enthusiasm

b6  
b7C

regarding the work of his section. He has no problems. Inspection inquiries indicate he commands the respect of and secures full cooperation from the employees in the Correspondence and Tours Section. He is considered fully qualified to continue in his current capacity.

7

UNITED STATES GOVERNMENT

# Memorandum

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Wick \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

TO : Mr. Wick *WRS*

DATE: 1-4-67

FROM : D. C. Morrell *DCM*

SUBJECT: DONALD C. MORRELL  
CORRESPONDENCE AND TOURS SECTION  
PERSONNEL MATTER

My memorandum to you of 10-25-66 reported that I had received a summons to appear in Montgomery County People's Court at 9:30 a.m., Monday, 11-28-66, to answer a suit for debt in the amount of \$51.75 and costs caused by the alleged negligent manner in which my daughter, [ ] age [ ] was operating my automobile. A continuance was attained in view of my daughter's absence from the jurisdiction due to her attendance at Vanderbilt University in Nashville, Tennessee, and this trial was held in this Court this morning, 1-4-67, at 9:30 a.m.

b6  
b7c

The Court sustained a directed verdict in my favor against the plaintiff inasmuch as there was no negligence shown on the part of my daughter and, in fact, the fault of the accident was attributed to the plaintiff who drove through a stop sign without having adequate clearance.

This is now a closed matter, and this is being submitted for the record.

## RECOMMENDATION:

None. For record purposes.

*WRS*

DCM:kcf *ful* (2)

REC-146

67-421042-182
32

1367 54

3  
804

January 9, 1967

PERSONAL

Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

Dear Morrell:

I want to commend you for the excellent job you did during the past year as Vice-President of the FBI Recreation Association.

The highly efficient and effective manner in which the various programs and affairs were conducted can be attributed to your splendid coordination and attention to detail. I appreciate your fine contributions to a successful year.

Sincerely,

J. Edgar Hoover

MAILED 2
COMM-FBI

1 = Mr. Wick (Personal Attention)

1 -  (Sent Direct)

KEC:dkj  
(5)  
67-421042

REC-134

183  
b6  
b7c

Based on Jenkins-Mohr memo 1-3-67 re: Calendar Year 1966 Recreation Activities, Commendation Matter.

NOTE: Salutation per file.

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Wick \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_

MAIL ROOM ☐ TELETYPE UNIT ☐

REPORT OF MEDICAL EXAMINATION

F.B.I.

88-108

1. LAST NAME—FIRST NAME—MIDDLE NAME <b>MORRELL, Donald Clark</b>			2. GRADE AND COMPONENT OR POSITION <b>SA</b>		3. IDENTIFICATION NO.	
4. HOME ADDRESS (Number, street or RFD, city or town, zone and State)			5. PURPOSE OF EXAMINATION <b>Annual</b>		6. DATE OF EXAMINATION <b>2-1-67</b>	
7. SEX <b>M</b>	8. RACE <b>CAU</b>	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY CIVILIAN		10. AGENCY	11. ORGANIZATION UNIT	
12. DATE OF BIRTH <b>6-13-18</b>		13. PLACE OF BIRTH <b>Brooklyn, N.Y.</b>		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN		
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS <b>NNMC</b>				16. OTHER INFORMATION		
17. RATING OR SPECIALTY				TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS

CLINICAL EVALUATION		
NOR-MAL	(Check each item in appropriate column; enter "NE" if not evaluated.)	ABNOR-MAL
<input checked="" type="checkbox"/>	18. HEAD, FACE, NECK, AND SCALP	
<input checked="" type="checkbox"/>	19. NOSE	
<input checked="" type="checkbox"/>	20. SINUSES	
<input checked="" type="checkbox"/>	21. MOUTH AND THROAT	
<input checked="" type="checkbox"/>	22. EARS—GENERAL (Int. & ext. canals) (Auditory acuity under items 70 and 71)	
<input checked="" type="checkbox"/>	23. DRUMS (Perforation)	
<input checked="" type="checkbox"/>	24. EYES—GENERAL (Visual acuity and refraction under items 69, 60 and 67)	
<input checked="" type="checkbox"/>	25. OPHTHALMOSCOPIC	
<input checked="" type="checkbox"/>	26. PUPILS (Equality and reaction)	
<input checked="" type="checkbox"/>	27. OCULAR MOTILITY (Associated parallel movements, nystagmus)	
<input checked="" type="checkbox"/>	28. LUNGS AND CHEST (Include breasts)	
<input checked="" type="checkbox"/>	29. HEART (Thrust, size, rhythm, sounds)	
<input checked="" type="checkbox"/>	30. VASCULAR SYSTEM (Varicosities, etc.)	
<input checked="" type="checkbox"/>	31. ABDOMEN AND VISCERA (Include hernia)	
<input checked="" type="checkbox"/>	32. ANUS AND RECTUM (Hemorrhoids, fistulae) (Prostate, if indicated)	
<input checked="" type="checkbox"/>	33. ENDOCRINE SYSTEM	
<input checked="" type="checkbox"/>	34. G-U SYSTEM	
<input checked="" type="checkbox"/>	35. UPPER EXTREMITIES (Strength, range of motion)	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	36. FEET	
<input checked="" type="checkbox"/>	37. LOWER EXTREMITIES (Except feet) (Strength, range of motion)	
<input checked="" type="checkbox"/>	38. SPINE, OTHER MUSCULOSKELETAL	
<input checked="" type="checkbox"/>	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
<input checked="" type="checkbox"/>	40. SKIN, LYMPHATICS	
<input checked="" type="checkbox"/>	41. NEUROLOGIC (Equilibrium, tests under item 72)	
<input checked="" type="checkbox"/>	42. PSYCHIATRIC (Specify any personality deviation)	
	43. PELVIC (Females only) (Check how done) <input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES. (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

35. Mild tenderness & evidence deformity of PIP joints of @ 2nd & 3rd fingers

RESULTS

13.1	HGB GMS
39	ICCMAL
6.0	HCT
	WBC
	PLT
	MONOS
	PLATELET

REC-140

ENCLOSURE

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)																	
O—Restorable teeth —Nonrestorable teeth X—Missing teeth XXX—Replaced by dentures (6 X 8)—Fixed bridge, brackets to include abutments																	
R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	L
I	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	E
G																	T
H																	
T																	

REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES

Exam Type III  
Class I  
No defects noted

LABORATORY FINDINGS

45. URINALYSIS: A. SPECIFIC GRAVITY <b>1.025</b>		46. CHEST X-RAY (Place, date, film number and result) <b>no active disease</b>	
B. ALBUMIN <b>neg</b>	D. MICROSCOPIC <b>Ess. Neg</b>	<b>6492-67 - at this time</b>	
C. SUGAR <b>neg</b>	E. EKG <b>WNL</b>	<b>#6492 X Rays of both hands - normal</b>	
47. SEROLOGY (Specify test used and result) <b>neg</b>	F. BLOOD TYPE AND RH FACTOR	50. OTHER TESTS <b>Uric Acid - 6.6</b>	

# MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT 67 1/2	52. WEIGHT 158	53. COLOR HAIR Brown	54. COLOR EYES Blue	55. BUILD: (Check one) SLENDER MEDIUM <b>HEAVY</b> OBESE	56. TEMPERATURE
57. BLOOD PRESSURE (Arm at heart level)			58. PULSE (Arm at heart level)		
A. SITTING SYS. 114 DIAS. 70	B. RECUMBENT SYS. DIAS.	C. STANDING (3 min.) SYS. DIAS.	A. SITTING 76	B. AFTER EXERCISE	C. 2 MIN. AFTER
59. DISTANT VISION			60. REFRACTION		
RIGHT 20/ 100	CORR. TO 20/ 20	BY S.	CX		
LEFT 20/ 70	CORR. TO 20/ 20	BY S.	CX		
62. HETEROPHORIA (Specify distance)			61. NEAR VISION		
ES° EX° R. H. L. H. PRISM DIV. PRISM CONV. CT PC PD			25 CORR. TO 25 CORR. TO		
63. ACCOMMODATION RIGHT LEFT		64. COLOR VISION (Test used and result) PIP 16/16		65. DEPTH PERCEPTION (Test used and score)	
66. FIELD OF VISION		67. NIGHT VISION (Test used and score)		68. RED LENS TEST	
69. INTRAOCULAR TENSION		70. HEARING		71. AUDIOMETER	
RIGHT WV /15 SV /15		LEFT WV 15 /15 SV 15 /15		250 256 500 512 1000 1024 2000 2048 3000 2896 4000 4096 6000 6144 8000 8192	
RIGHT LEFT		RIGHT LEFT		72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)	

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

35. Tenderness, mild, 5 deformity, PIP joints of 2nd & 3rd fingers.

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify) 1) Serum Urea acid 2) X-Ray of both hands, finger joints included		76. A. PHYSICAL PROFILE					
77. EXAMINEE (Check) A. <input checked="" type="checkbox"/> IS QUALIFIED FOR B. <input type="checkbox"/> IS NOT QUALIFIED FOR		P	U	L	H	E	S
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER		B. PHYSICAL CATEGORY					
79. TYPED OR PRINTED NAME OF PHYSICIAN		A	B	C	E		
80. TYPED OR PRINTED NAME OF PHYSICIAN		SIGNATURE					
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)		SIGNATURE					
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY		SIGNATURE					
		NUMBER OF ATTACHED SHEETS					

REPORT OF MEDICAL HISTORY

THIS INFORMATION IS FOR OFFICIAL USE ONLY AND WILL NOT BE RELEASED TO UNAUTHORIZED PERSONS

FBI

89-104

1. LAST NAME—FIRST NAME—MIDDLE NAME <b>MORRELL, DONALD C.</b>		2. GRADE AND COMPONENT OR POSITION <b>FBI</b>	3. IDENTIFICATION NO.
4. HOME ADDRESS (Number, street or RFD, city or town, zone and State)		5. PURPOSE OF EXAMINATION <b>ANNUAL PHYSICAL</b>	6. DATE OF EXAMINATION <b>2-1-67</b>
7. SEX <b>M</b>	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY CIVILIAN	10. AGENCY
11. ORGANIZATION UNIT		12. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
13. DATE OF BIRTH <b>JUNE 13, 1918</b>		13. PLACE OF BIRTH <b>BROOKLYN, NEW YORK</b>	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS		16. OTHER INFORMATION	

17. STATEMENT OF EXAMINEE'S PRESENT HEALTH IN OWN WORDS. (Follow by description of past history, if complaint exists)

**Good - painful left forefinger joints; anemia**

18. FAMILY HISTORY

RELATION	AGE	STATE OF HEALTH	IF DEAD, CAUSE OF DEATH	AGE AT DEATH	YES	NO	(Check each item)	RELATION(S)
FATHER			<b>Coronary occlusion</b>	<b>61</b>		<input checked="" type="checkbox"/>	HAD TUBERCULOSIS	
MOTHER	<b>75</b>	<b>Good</b>				<input checked="" type="checkbox"/>	HAD SYPHILIS	
SPOUSE	<b>48</b>	<b>Good</b>				<input checked="" type="checkbox"/>	HAD DIABETES	
BROTHERS	<b>52</b>	<b>Good</b>				<input checked="" type="checkbox"/>	HAD CANCER	
AND						<input checked="" type="checkbox"/>	HAD KIDNEY TROUBLE	
SISTERS					<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	HAD HEART TROUBLE	<b>Father</b>
						<input checked="" type="checkbox"/>	HAD STOMACH TROUBLE	
						<input checked="" type="checkbox"/>	HAD RHEUMATISM (Arthritis)	
CHILDREN	<b>5</b>	<b>Good</b>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	HAD ASTHMA (HAY FEVER) HIVES	<b>WIFE</b>
<b>8</b>		<b>Good</b>				<input checked="" type="checkbox"/>	HAD EPILEPSY (Fits)	
						<input checked="" type="checkbox"/>	COMMITTED SUICIDE	
						<input checked="" type="checkbox"/>	BEEN INSANE	

20. HAVE YOU EVER HAD OR HAVE YOU NOW (Place check at left of each item)

YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)
<input checked="" type="checkbox"/>		SCARLET FEVER, TRYSIPELAS	<input checked="" type="checkbox"/>		GOITER	<input checked="" type="checkbox"/>		TUMOR, GROWTH, CYST, CANCER	<input checked="" type="checkbox"/>		"TRICK" OR LOCKED KNEE
<input checked="" type="checkbox"/>		DIPHTHERIA	<input checked="" type="checkbox"/>		TUBERCULOSIS	<input checked="" type="checkbox"/>		RUPTURE/HERNIA	<input checked="" type="checkbox"/>		FOOT TROUBLE
<input checked="" type="checkbox"/>		RHEUMATIC FEVER	<input checked="" type="checkbox"/>		SOAKING SWEATS (Night sweats)	<input checked="" type="checkbox"/>		APPENDICITIS	<input checked="" type="checkbox"/>		NEURITIS
<input checked="" type="checkbox"/>		SWOLLEN OR PAINFUL JOINTS	<input checked="" type="checkbox"/>		ASTHMA	<input checked="" type="checkbox"/>		PILES OR RECTAL DISEASE	<input checked="" type="checkbox"/>		PARALYSIS (Inc. infantile)
<input checked="" type="checkbox"/>		MUMPS	<input checked="" type="checkbox"/>		SHORTNESS OF BREATH	<input checked="" type="checkbox"/>		FREQUENT OR PAINFUL URINATION	<input checked="" type="checkbox"/>		EPILEPSY OR FITS
<input checked="" type="checkbox"/>		COLOR BLINDNESS	<input checked="" type="checkbox"/>		PAIN OR PRESSURE IN CHEST	<input checked="" type="checkbox"/>		KIDNEY STONE OR BLOOD IN URINE	<input checked="" type="checkbox"/>		CAR, TRAIN, SEA, OR AIR SICKNESS
<input checked="" type="checkbox"/>		FREQUENT OR SEVERE HEADACHE	<input checked="" type="checkbox"/>		CHRONIC COUGH	<input checked="" type="checkbox"/>		SUGAR OR ALBUMIN IN URINE	<input checked="" type="checkbox"/>		FREQUENT TROUBLE SLEEPING
<input checked="" type="checkbox"/>		DIZZINESS OR FAINTING SPELLS	<input checked="" type="checkbox"/>		PALPITATION OR POUNDING HEART	<input checked="" type="checkbox"/>		BOILS	<input checked="" type="checkbox"/>		FREQUENT OR TERRIFYING NIGHTMARES
<input checked="" type="checkbox"/>		EYE TROUBLE <b>New glasses</b>	<input checked="" type="checkbox"/>		HIGH OR LOW BLOOD PRESSURE	<input checked="" type="checkbox"/>		VD, SYPHILIS, GONORRHEA, ETC.	<input checked="" type="checkbox"/>		DEPRESSION OR EXCESSIVE WORRY
<input checked="" type="checkbox"/>		EAR, NOSE OR THROAT TROUBLE	<input checked="" type="checkbox"/>		CRAMPS IN YOUR LEGS	<input checked="" type="checkbox"/>		RECENT GAIN OR LOSS OF WEIGHT	<input checked="" type="checkbox"/>		LOSS OF MEMORY OR AMNESIA
<input checked="" type="checkbox"/>		RUNNING EARS	<input checked="" type="checkbox"/>		FREQUENT INDIGESTION	<input checked="" type="checkbox"/>		ARTHRITIS OR RHEUMATISM	<input checked="" type="checkbox"/>		BED WETTING
<input checked="" type="checkbox"/>		HEARING LOSS	<input checked="" type="checkbox"/>		STOMACH, LIVER OR INTESTINAL TROUBLE	<input checked="" type="checkbox"/>		BONE, JOINT, OR OTHER DEFORMITY	<input checked="" type="checkbox"/>		NERVOUS TROUBLE OF ANY SORT
<input checked="" type="checkbox"/>		CHRONIC OR FREQUENT COLDS	<input checked="" type="checkbox"/>		GALL BLADDER TROUBLE OR GALL STONES	<input checked="" type="checkbox"/>		LAMENESS	<input checked="" type="checkbox"/>		ANY DRUG OR NARCOTIC HABIT
<input checked="" type="checkbox"/>		SEVERE TOOTH OR GUM TROUBLE	<input checked="" type="checkbox"/>		JAUNDICE	<input checked="" type="checkbox"/>		LOSS OF ARM, LEG, FINGER, OR TOE	<input checked="" type="checkbox"/>		EXCESSIVE DRINKING HABIT
<input checked="" type="checkbox"/>		SINUSITIS	<input checked="" type="checkbox"/>		ANY REACTION TO SERUM, DRUG OR MEDICINE	<input checked="" type="checkbox"/>		PAINFUL OR "TRICK" SHOULDER OR ELBOW	<input checked="" type="checkbox"/>		HOMOSEXUAL TENDENCIES
<input checked="" type="checkbox"/>		HAY FEVER	<input checked="" type="checkbox"/>		HISTORY OF BROKEN BONES	<input checked="" type="checkbox"/>		RECURRENT BACK PAIN	<input checked="" type="checkbox"/>		PERIODS OF UNCONSCIOUSNESS
<input checked="" type="checkbox"/>		HISTORY OF HEAD INJURY									
<input checked="" type="checkbox"/>		SKIN DISEASES									

21. HAVE YOU EVER (Check each item)

<input checked="" type="checkbox"/>	WORN GLASSES—CONTACT LENS	<input checked="" type="checkbox"/>	ATTEMPTED SUICIDE
<input checked="" type="checkbox"/>	WORN AN ARTIFICIAL EYE	<input checked="" type="checkbox"/>	BEEN A SLEEP WALKER
<input checked="" type="checkbox"/>	WORN HEARING AIDS	<input checked="" type="checkbox"/>	LIVED WITH ANYONE WHO HAD TUBERCULOSIS
<input checked="" type="checkbox"/>	STUTTERED OR STAMMERED	<input checked="" type="checkbox"/>	COUGHED UP BLOOD
<input checked="" type="checkbox"/>	WORN A BRACE OR BACK SUPPORT	<input checked="" type="checkbox"/>	BLED EXCESSIVELY AFTER INJURY OR TOOTH EXTRACTION

22. FEMALES ONLY: A. HAVE YOU EVER—

<input checked="" type="checkbox"/>	BEEN PREGNANT	<input checked="" type="checkbox"/>	AGE AT ONSET OF MENSTRUATION
<input checked="" type="checkbox"/>	HAD A VAGINAL DISCHARGE	<input checked="" type="checkbox"/>	INTERVAL BETWEEN PERIODS
<input checked="" type="checkbox"/>	BEEN TREATED FOR A FEMALE DISORDER	<input checked="" type="checkbox"/>	DURATION OF PERIODS
<input checked="" type="checkbox"/>	HAD PAINFUL MENSTRUATION	<input checked="" type="checkbox"/>	DATE OF LAST PERIOD
<input checked="" type="checkbox"/>	HAD IRREGULAR MENSTRUATION	QUANTITY: <input type="checkbox"/> NORMAL <input type="checkbox"/> EXCESSIVE <input type="checkbox"/> SCANTY	

23. HOW MANY JOBS HAVE YOU HAD IN THE PAST THREE YEARS?

**ONE**

24. WHAT IS THE LONGEST PERIOD YOU HELD ANY OF THESE JOBS?

**19+ YEARS**

25. WHAT IS YOUR USUAL OCCUPATION?

**FBI AGENT**

26. ARE YOU (Check one)

☒ RIGHT HANDED ☐ LEFT HANDED

YES	NO	CHECK EACH ITEM YES OR NO. EVERY ITEM CHECKED "YES" MUST BE FULLY EXPLAINED IN BLANK SPACE ON RIGHT
	<input checked="" type="checkbox"/>	27. HAVE YOU BEEN REFUSED EMPLOYMENT OR BEEN UNABLE TO HOLD A JOB BECAUSE OF: A. SENSITIVITY TO CHEMICALS, DUST, SUNLIGHT, ETC.
	<input checked="" type="checkbox"/>	B. INABILITY TO PERFORM CERTAIN MOTIONS
	<input checked="" type="checkbox"/>	C. INABILITY TO ASSUME CERTAIN POSITIONS
	<input checked="" type="checkbox"/>	D. OTHER MEDICAL REASONS (If yes, give reasons)
	<input checked="" type="checkbox"/>	28. HAVE YOU EVER WORKED WITH RADIOACTIVE SUBSTANCE?
	<input checked="" type="checkbox"/>	29. DID YOU HAVE DIFFICULTY WITH SCHOOL STUDIES OR TEACHERS? (If yes, give details)
	<input checked="" type="checkbox"/>	30. HAVE YOU EVER BEEN DENIED LIFE INSURANCE? (If yes, state reason and give details)
<input checked="" type="checkbox"/>		31. HAVE YOU HAD, OR HAVE YOU BEEN ADVISED TO HAVE, ANY OPERATIONS? (If yes, describe and give age at which occurred) <i>Yes T+A age 5; Submucous resection 45.</i>
	<input checked="" type="checkbox"/>	32. HAVE YOU EVER BEEN A PATIENT (committed or voluntary) IN A MENTAL HOSPITAL OR SANATORIUM? (If yes, specify when, where, why, and name of doctor, and complete address of hospital or clinic)
	<input checked="" type="checkbox"/>	33. HAVE YOU EVER HAD ANY ILLNESS OR INJURY OTHER THAN THOSE ALREADY NOTED? (If yes, specify when, where, and give details)
<input checked="" type="checkbox"/>		34. HAVE YOU CONSULTED OR BEEN TREATED BY CLINICS, PHYSICIANS, HEALERS, OR OTHER PRACTITIONERS WITHIN THE PAST 5 YEARS? (If yes, give complete address of doctor, hospital, clinic, and details) <i>Dr. James Nolan Washington Clinic, Washington, D.C. for anemia; complete tests 1964 + 1966.</i>
	<input checked="" type="checkbox"/>	35. HAVE YOU TREATED YOURSELF FOR ILLNESSES OTHER THAN MINOR COLDS? (If yes, which illnesses)
	<input checked="" type="checkbox"/>	36. HAVE YOU EVER BEEN REJECTED FOR MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date and reason for rejection)
	<input checked="" type="checkbox"/>	37. HAVE YOU EVER BEEN DISCHARGED FROM MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (If yes, give date, reason, and type of discharge: whether honorable, other than honorable, for unfitness or unsuitability)
	<input checked="" type="checkbox"/>	38. HAVE YOU EVER RECEIVED, IS THERE PENDING, OR HAVE YOU APPLIED FOR PENSION OR COMPENSATION FOR EXISTING DISABILITY? (If yes, specify what kind, granted by whom, and what amount, when, why)

WARNING: A FALSE OR DISHONEST ANSWER TO ANY OF THE QUESTIONS ON THIS FORM MAY BE PUNISHED BY FINE OR IMPRISONMENT (18 U.S.C. 1001)

I CERTIFY THAT I HAVE REVIEWED THE FOREGOING INFORMATION SUPPLIED BY ME AND THAT IT IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

I AUTHORIZE ANY OF THE DOCTORS, HOSPITALS, OR CLINICS MENTIONED ABOVE TO FURNISH THE GOVERNMENT A COMPLETE TRANSCRIPT OF MY MEDICAL RECORD FOR PURPOSES OF PROCESSING MY APPLICATION FOR THIS EMPLOYMENT OR SERVICE.

TYPED OR PRINTED NAME OF EXAMINEE

DONALD C. MORRELL

SIGNATURE

Donald C. Morrell

40. PHYSICIAN'S SUMMARY AND ELABORATION OF ALL PERTINENT DATA (Physician shall comment on all positive answers in items 20 thru 39)

History of mildly elevated serum uric acid on exam elsewhere this past yr. Test done because of history of aching in PIP joints of 2<sup>nd</sup> & 3<sup>rd</sup> fingers.

TYPED OR PRINTED NAME OF PHYSICIAN OR EXAMINER

DATE

1 Feb 1967

SIGNATURE

J. P. [Signature]

NUMBER OF ATTACHED SHEETS



Attachment to Standard Form 88, Report of Medical Examination  
For Information and Guidance of Medical Examiner

Name of Examinee Morrell, D. C.  
(Type or print) Last First Middle

The following portions of the attached examination report form need not be completed:

2	14	68
3	17	69
4	62	72
9	65	76
11	67	

46. Is necessary unless facilities for affording same are not readily available.
48. Not required unless examinee is over 35 years of age or examination indicates such is desirable.
49. Is necessary unless facilities for affording same are not readily available.
71. Audiometer examinations should be afforded whenever possible for all Special Agent applicants and Special Agents. Applicants for the Special Agent position will not be accepted if the hearing loss exceeds a 15 decibel average in either ear in the conversational speech range (500, 1000, 2000 cycles).

For All Examinees, Whether Clerical or Special Agent Applicants or Employees:

The medical examiner should answer the following question:

Examinee ☒ is ☐ is not qualified for strenuous physical exertion.

To be Answered in the Case of All Male Employees and Male Applicants:

1. Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

2. Does examinee have any defects prohibiting safe operation of motor vehicles?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

3. For safe driving of motor vehicles, Civil Service Commission requires distant vision must test at least 20/40 in one eye and 20/100 in the other, corrected or uncorrected. Should examinee wear corrective glasses while operating a motor vehicle? ☒ Yes ☐ No

If recommendation is based on a factor other than above standard, indicate basis \_\_\_\_\_

Distant vision corrected to normal with

eyeglasses.

SA Wick was advised on 2/3/67 that it will be necessary for him to wear corrective glasses while driving a Government vehicle.

Wick (Signature)

8cm

Desirable Weight Ranges for Males

Height	Small Frame	Medium Frame	Large Frame
5' 4"	117 - 125	123 - 135	131 - 148
5' 5"	120 - 129	126 - 139	134 - 152
5' 6"	124 - 133	130 - 143	138 - 157
5' 7"	128 - 137	134 - 148	143 - 162
5' 8"	132 - 141	138 - 152	147 - 166
5' 9"	136 - 146	142 - 156	151 - 170
5' 10"	140 - 150	146 - 161	155 - 175
5' 11"	144 - 154	150 - 166	160 - 180
6'	148 - 158	154 - 171	164 - 185
6' 1"	152 - 163	158 - 176	169 - 190
6' 2"	156 - 167	163 - 181	174 - 195
6' 3"	160 - 171	168 - 186	178 - 200
6' 4"	169 - 180	178 - 196	188 - 210
6' 5"	174 - 185	182 - 202	192 - 216

4. Examinee's frame is ☐ small ☐ medium ☒ large
5. Considering above weight table, the examinee's frame, and other individual physical characteristics, I consider his present weight ☒ Satisfactory ☐ Excessive ☐ Deficient
6. Under proper medical supervision, examinee should ☐ lose \_\_\_\_\_ pounds  
☐ gain \_\_\_\_\_ pounds

Remarks: \_\_\_\_\_

*[Signature]*  
(Signature of Medical Examiner)

*1 Feb. 1967*  
(Date)



**UNITED STATES DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION**

*In Reply, Please Refer to  
File No.*

Director  
Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C. 20535

Dear Sir:

For inclusion in the fund to be paid to the designated beneficiary of any Special Agent of the FBI who has previously contributed to this fund and who dies from any cause except self-destruction while employed as a Special Agent, I am forwarding herewith (by Check - Money Order) the sum of \$10, payable to S.A.I.F., to be included in said fund. Payment will be made for death by self-destruction after the Agent has been a member of the fund for a continuous period of two years. It is understood and agreed that the sum tendered herewith is a voluntary, gratuitous contribution to said fund which I understand is to be administered in the following manner.

The Director of the FBI will appoint a committee which shall consider all matters pertaining to the acquisition, safe keeping and expending of said fund, which committee will recommend appropriate action to the Director in pertinent matters. The Assistant Director of the Administrative Division of the FBI shall receive all contributions and account for same to the Director. Upon the death of any Special Agent who is a member of said fund the appointed committee will consider the case and submit a recommendation to the Director as to its conclusions. Appropriate instructions will then be issued to the Assistant Director of the Administrative Division, directing him to pay to the designated beneficiary the sum of \$10,000. The liability of the fund shall not under any circumstances exceed the amount of monies in the fund at the time any liability shall occur.

**EXECUTE IN DUPLICATE AND SUBMIT BOTH COPIES TO THE BUREAU**

Official Bureau Name (please type or print)	Date	Office of Assignment (or SOG Division)
SA Donald C. Morrell	3-10-67	Crime Records
The following person is designated as my beneficiary for Special Agents Insurance Fund:		
Name (primary beneficiary; use given first name if female)	Relationship	
Elizabeth H. Morrell	Wife	
Address		
5516 Charlcote Road, Bethesda, Maryland 20034		
Name (contingent beneficiary, if desired; use given first name if female)	Relationship	
	Son and Daughter	
Address		

Do you desire to designate the above-listed beneficiaries as the beneficiary and contingent beneficiary respectively of the Chas. S. Ross Fund as well? ☒ Yes ☐ No If not, the entire following portion must be executed.

The following person is designated as my beneficiary under the Chas. S. Ross Fund providing \$1500 death benefit to beneficiary of agents killed in the line of duty, other than travel accidents.

Name (primary beneficiary; use given first name if female)	Relationship
Address	
Name (contingent beneficiary, if desired; use given first name if female)	Relationship
Address	

Payment Forwarded  
Special Agents Insurance Fund

MAR 11 1967

J. Edgar Hoover, Director

Very truly yours,

*Donald C. Morrell*  
Special Agent

Mr. Callahan

4-6-67

J. B. Adams

**QUALITY SALARY INCREASES  
INVESTIGATIVE PERSONNEL  
CRIME RECORDS DIVISION**

Mr. Wick has recommended six agents from his division for Quality Salary Increases in connection with the submission of their 1967 annual performance reports. These are in addition to four Outstanding ratings recommended for personnel in the Crime Records Division. These men were rated excellent or outstanding on all items in their current performance reports and received over-all adjective ratings of Excellent. Mr. Wick in justification certified that they have performed the most important functions of their positions in a manner which substantially exceeds the normal requirement; their work has been highly effective; this exceptional high level of effectiveness has been sustained during the rating period and is expected to continue indefinitely; and when viewed as a whole their performances merit a faster than normal salary advancement.

In addition to the foregoing, they are completely available and their overtime has been satisfactory. There follow additional specific comments regarding each for the past year.

b6  
b7C

SA [redacted] - EOD 3-3-47, GS 15, \$21,192. No censures and received Quality Salary Increase effective 5-8-66 for sustained above-average performance during previous year.

SA Milton A. Jones - EOD 2-6-39, GS 16, \$24,095. No censures and received Quality Salary Increase effective 5-8-66 in connection with 1966 Outstanding performance report.

SA M. James Kruschke - EOD 2-4-52, GS 14, \$16,152. No censures and commended twice.

SA Donald C. Morrell - EOD 3-18-47, GS 15, \$19,978. He was censured 5-11-66 as he prepared an outgoing communication which contained inaccurate information. Commended on two occasions.

SA James M. Murphy - EOD 1-22-51, GS 14, \$17,193. He was censured 7-3-66 for correspondence error. Commended once through superior.

SA [redacted] - EOD 10-13-47, GS 15, \$20,535. Commended once. No censures.

Enclosures  
LDH:tan (9)

1 - [redacted]

1 - Personnel file of each agent listed

64

Memorandum to Mr. Callahan  
Re: Quality Salary Increases  
Investigative Personnel  
Crime Records Division

A careful review of information submitted by Mr. Wick, including performance reports and agents' personnel files, indicates that Quality Salary Increases are justified and would be more suitable recognition for their superior performances than cash awards under the Incentive Awards Program.

RECOMMENDATION:

That SAs [redacted] Milton A. Jones, M. James  
Kruschke, Donald C. Morrell, James M. Murphy and [redacted]  
[redacted] be approved for Quality Salary Increases effective 5-7-67.

b6  
b7C

PERMANENT BRIEFS ATTACHED.

April 11, 1967

PERSONAL

Mr. Donald C. Correll  
Federal Bureau of Investigation  
Washington, D. C.

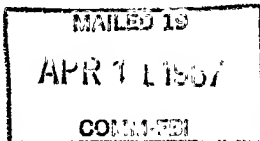
Dear Correll:

It is indeed a pleasure to advise you that the exceptional manner in which you have discharged your responsibilities during the past year has merited the approval of a quality within-grade salary increase.

This increase, effective May 7, 1967, is from \$19,978 per annum to \$20,585 per annum in Grade GS-15. I do not want the occasion to pass without expressing my sincere appreciation for your devoted efforts.

Sincerely,

J. Edgar Hoover



REC-149

4-114-185

1 - Mr. Wick (PERSONAL ATTENTION) Enclosure

You should personally present this award but should this not be possible or should presentation be unreasonably delayed by your absence official acting for you should present it.

1 - Movement

1 -

1 -

1 -

1 -

(Sent Direct)

1 - Voucher - Statistical Section (Sent Direct)

1 -

1 -

1 -

1 -

1 -

Olson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Wick \_\_\_\_\_  
Tasler \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

MAIL ROOM ☐ TELETYPE UNIT ☐

b6  
b7c

4-114-185

Mr. Tolson	_____
Mr. DeLoach	_____
Mr. Mohr	_____
Mr. Wick	_____
Mr. Casper	_____
Mr. Callahan	_____
Mr. Conrad	_____
Mr. Felt	_____
Mr. Gale	_____
Mr. Rosen	_____
Mr. Sullivan	_____
Mr. Tavel	_____
Mr. Trotter	_____
Tele. Room	_____
Miss Holmes	_____
Miss Gandy	_____

April 12, 1967

*Anthony*

Honorable John Edgar Hoover  
 Director  
 Federal Bureau of Investigation  
 Washington, D. C.

Dear Mr. Hoover:

It was a genuine pleasure to receive your letter of April 11th advising of your granting me a quality within-grade increase in salary.

I want you to know of my deep appreciation for this recognition and assure you I will do everything within my power to serve you and the FBI to the best of my ability.

Sincerely yours,

*Donald C. Morrell*  
 Donald C. Morrell

REC-141

67-421042-186	
Searched	Numbered
APR 18 1967	

APR 19 1967

*[Handwritten mark]*

April 19, 1967



Washington, D. C. 20036

b6  
b7c

Dear 

I have received your letter of April 14th concerning the recent tour of our headquarters taken by your friends. I am glad they enjoyed visiting our facilities, and I appreciate your favorable comments regarding Messrs. Morrell and Stapleton. They join me in thanking you for your thoughtful letter.

Sincerely yours,


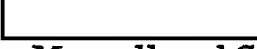
1 - Mr. Wick - Enclosure

Personal Attention: Bring to the attention of Special Agents Donald C. Morrell and William H. Stapleton.

1 - Tour Room - Enclosure

① - Personnel File of SA Donald C. Morrell - Enclosure

1 - Personnel File of SA William H. Stapleton - Enclosure

NOTE: Bufiles contain no record of correspondent. A special tour for 4-7-67 was arranged for friends of  by Special Agent Donald C. Morrell.  did not accompany the tour group. Special Agents Morrell and Stapleton are assigned to the Crime Records Division.

JBT:kcf (7)

RECEIVED YELLOW



19  
OFFICE OF THE *Administrator*

Mr. Tolson	_____
Mr. DeLoach	_____
Mr. Mohr	_____
Mr. Wick	✓
Mr. Casper	_____
Mr. Callahan	_____
Mr. Conrad	_____
Mr. Felt	_____
Mr. Gale	_____
Rosen	_____
Sullivan	_____
Tavel	b6
Trotter	b7C
e. Room	_____
Miss Holmes	_____
Miss Gandy	_____

April 14, 1967

The Honorable J. Edgar Hoover  
Director  
Federal Bureau Of Investigation  
Department of Justice  
9th & Pennsylvania Avenue, N. W.  
Washington, D. C.

Dear Mr. Hoover:

I thought you and your staff would like to know how pleased we were with the recent tour of the Bureau Headquarters.

Needless to say, it was most interesting, but the personal attention we received from Mr. Donald Morell and Mr. William Stapleton, added a great deal to the tour.

Being a resident of the area, we were most happy that our friends commented that this was the high light of their Washington trip and believe me, they did make the "tour."

Sincerely,

ZHW:mb

*T*  
*me*  
CORRESPONDENCE

FEDERAL BUREAU OF INVESTIGATION  
UNITED STATES DEPARTMENT OF JUSTICE

## REPORT OF PERFORMANCE RATING

Name of Employee: Donald C. MorrellWhere Assigned: Crime Records Correspondence and Tours Section  
(Division) (Section, Unit)Official Position Title and Grade: Special Agent - Section Chief, GS-15Rating Period: from 4-1-66 to 3-31-67ADJECTIVE RATING: EXCELLENT  
Outstanding, Excellent, Satisfactory, UnsatisfactoryEmployee's  
InitialsMMRated by: Robert E. Vick Assistant Director 3-31-67  
Signature Title DateReviewed by: [Signature] Assistant Director APR 19 1967  
Signature Title DateRating Approved by: [Signature] Assistant Director APR 19 1967  
Signature Title Date

## TYPE OF REPORT

☒ Official  
☒ Annual

REC-134

67-421042-181	
Searched	Numbered
<input type="checkbox"/> Administrative	APR 20 1967
<input type="checkbox"/> 60-Day	
<input type="checkbox"/> 90-Day	
<input type="checkbox"/> Transfer	
<input type="checkbox"/> Separation from Service	
<input type="checkbox"/> Special	

7 APR 25 1967  
64

# PERFORMANCE RATING GUIDE FOR INVESTIGATIVE PERSONNEL

(For use as attachment to Performance Rating Form No. FD-185)

Name of Employee Donald C. Morrell Title Special Agent - Section Chief  
Rating Period: from 4-1-66 to 3-31-67

## RATING GUIDE AND CHECK-LIST

Note: Only those items having pertinent bearing on employee's performance should be rated. All employees in same salary grade should be compared.

### RATE ITEMS AS FOLLOWS:

- + Outstanding (exceeding excellent and deserving of special commendation).  
E Excellent.  
✓ Satisfactory (good or very good).  
- Unsatisfactory.  
O No opportunity to appraise performance during rating period.

### Guide for determining adjective ratings:

- "Outstanding" adjective rating requires (A) that all elements be + and (B) that each and every rated element be factually justified by narrative details, including reasons for considering each worthy of Special Commendation and be attached to FD-185a.
- "Excellent," "Satisfactory" or "Unsatisfactory" adjective ratings will depend upon the composite result of evaluating all rated elements rather than following any mechanical formulas; however, for an employee to be rated "Excellent" he must not be rated unsatisfactory on any performance evaluation factors on the rating guide and check-list and must be rated "Excellent" or "Outstanding" on the majority of such rating factors. Good judgment must be exercised to insure that adjective rating is reasonable in the light of elements rated.
  - Any element rated "Unsatisfactory" must be supported by narrative comments.
  - An official rating of "Unsatisfactory" must be supported in writing stating (1) wherein the performance is unsatisfactory, (2) the facts of the (90-day) prior warning, and (3) the efforts made after the warning to help the employee bring his performance up to a satisfactory level and must be attached to FD-185a.

- |   |   |
|---|---|
| <u>+</u> (1) Personal appearance.   | <u>E</u> (16) Firearms ability.   |
| <u>+</u> (2) Personality and effectiveness of his personal contacts.  | <u>O</u> (17) Development of informants and sources of information.   |
| <u>+</u> (3) Attitude (including dependability, cooperativeness, loyalty, enthusiasm, amenability and willingness to equitably share work load).  | <u>+</u> (18) Reporting ability: <ul style="list-style-type: none"> <li><u>O</u> (a) Investigative reports</li> <li><u>O</u> (b) Summary reports</li> <li><u>+</u> (c) Memos, letters, wires</li> </ul> (Consider: <u>+</u> conciseness; <u>+</u> clarity; <u>+</u> organization; <u>+</u> thoroughness; <u>+</u> accuracy; <u>+</u> adequacy and pertinency of leads; <u>+</u> administrative detail.)   |
| <u>+</u> (4) Physical fitness (including health, energy, stamina).  | <u>O</u> (19) Performance as a witness.   |
| <u>+</u> (5) Resourcefulness and ingenuity.   | <u>+</u> (20) Executive ability: <ul style="list-style-type: none"> <li><u>+</u> (a) Leadership</li> <li><u>+</u> (b) Ability to handle personnel</li> <li><u>+</u> (c) Planning</li> <li><u>+</u> (d) Making decisions</li> <li><u>+</u> (e) Assignment of work</li> <li><u>+</u> (f) Training subordinates</li> <li><u>+</u> (g) Devising procedures</li> <li><u>+</u> (h) Emotional stability</li> <li><u>+</u> (i) Promoting high morale</li> <li><u>+</u> (j) Getting results</li> </ul> |
| <u>+</u> (6) Forcefulness and aggressiveness as required.   | <u>O</u> (21) Ability on raids and dangerous assignments: <ul style="list-style-type: none"> <li><u>+</u> (a) As leader</li> <li><u>+</u> (b) As participant</li> </ul>   |
| <u>+</u> (7) Judgment, including common sense, ability to arrive at proper conclusions, ability to define objectives.   | <u>+</u> (22) Organizational interest, such as making of suggestions for improvement.   |
| <u>+</u> (8) Initiative and the taking of appropriate action on own responsibility.   | <u>+</u> (23) Ability to work under pressure.   |
| <u>+</u> (9) Planning ability and its application to the work.  | <u>+</u> (24) Miscellaneous. Specify and rate: <ul style="list-style-type: none"> <li><u>+</u> Dictation ability</li> </ul>   |
| <u>+</u> (10) Accuracy and attention to pertinent detail.   |   |
| <u>+</u> (11) Industry, including energetic, consistent application to duties.  |   |
| <u>+</u> (12) Productivity, including amount of acceptable work produced and rate of progress on or completion of assignments. Also consider adherence to deadlines unless failure to meet is attributable to causes beyond employee's control.   |   |
| <u>+</u> (13) Knowledge of duties, instructions, rules and regulations, including readiness of comprehension and "know how" of application.   |   |
| <u>O</u> (14) Investigative ability and results: <ul style="list-style-type: none"> <li><u>+</u> (a) Internal security cases</li> <li><u>+</u> (b) Criminal or general investigative cases</li> <li><u>+</u> (c) Fugitive cases</li> <li><u>+</u> (d) Applicant cases</li> <li><u>+</u> (e) Accounting cases</li> </ul> |   |
| <u>O</u> (15) Physical surveillance ability.  |   |

- A. Specify general nature of assignment during most of rating period (such as security, criminal, applicant squad, or as Resident Agent, supervisor, instructor, etc.):

Section Chief - Correspondence and Tours Section

- B. Specify employee's most noteworthy special talents (such as investigator, desk man, research, instructor, speaker):

Administrator, Desk Man

- C. (1) Is employee available for general assignment wherever needs of service require? Yes (If answer is not "yes," explain in narrative comments.)  
(2) Is employee available for special assignment wherever needs of service require? Yes (If answer is not "yes," explain in narrative comments.)

- D. 1. Has employee had an abnormal sick leave record during rating period? No 2. Has employee used more sick leave (including annual leave or LWOP for illness) during rating period than the amount of sick leave earned during such period? No (If answer to either question is "yes," explain in narrative comments.)

- E. Is employee qualified to operate a motor vehicle incidental to his official duties? ☒ Yes ☐ No  
If answer is "yes," personnel file must reflect the following: (a) Has valid State or local operator's license for type vehicle he is to use.  
(b) Is physically fit to drive. (c) Past safe-driving record OK or has passed Bureau road test.

ADJECTIVE RATING:

EXCELLENT

EMPLOYEE'S INITIALS

DM

Outstanding, Excellent, Satisfactory, Unsatisfactory

## NARRATIVE COMMENTS

1. PERSONAL APPEARANCE AND PERSONALITY: This Agent makes an outstanding personal appearance, and on the basis of his businesslike manner, warm personality, and enthusiasm makes an excellent Bureau representative.
2. ABILITY TO PARTICIPATE IN RAIDS AND DANGEROUS ASSIGNMENTS:

N. A.

3. LIMITATIONS ON AVAILABILITY; PHYSICAL LIMITATIONS AFFECTING PERFORMANCE; AND SICK LEAVE INFORMATION: There are no limitations on his availability and his sick leave record is excellent with no physical limitations affecting his performance of duty.
4. TYPE OF CASES OR WORK HANDLED AND APPRAISAL OF OVER-ALL PERFORMANCE, INCLUDING ABILITY TO HANDLE COMPLICATED INVESTIGATIVE MATTERS AND SUPERVISION REQUIRED:

During the rating period he has served in an admirable fashion as the Section Chief of the Correspondence and Tours Section. In this capacity he has distinguished himself for his executive ability, administrative proficiency, and personal leadership in achieving outstanding records for volumes of work handled and accuracy in details.

Under his guidance in this Section are three units, and he has personal supervision over the voluminous correspondence program as well as the tours of Bureau facilities. During 1966 there was established a new record for tours when approximately 645,000 persons visited Bureau Headquarters. Also in 1966 a total of 76,400 pieces of outgoing correspondence were processed and handled, setting a new record in this category of work. The success in this field and the outstanding results achieved by the Correspondence and Tours Section, in large measure, can be attributed to the foresight and competence of Mr. Morrell and also to the loyal and ardent support which his leadership engenders in his associates.

Over and above his regular assignments, this Agent, during the rating period, served as an officer in the FBI Recreation Association and continued to represent the Bureau in the Special Agents Mutual Benefit Association, and in these two roles he was personally responsible for achieving many benefits for the Bureau.

*QCM*  
Initials

5. NUMBER OF INCENTIVE AWARDS AND COMMENDATIONS RECEIVED: He was commended by letter of 11-16-66 for his contribution to the handling of a large volume of correspondence in a special project; and by letter of 1-9-67 for his services as a Vice President of the FBIRA in 1966. By letter of 9-20-66 to him the (continued on page 3)

6. DISCIPLINARY ACTION AND JUSTIFICATION FOR ANY UNSATISFACTORY ITEMS:  
(List items taken into consideration on rating guide and check list.)

Despite the fact that he reviewed and processed numerous volumes of correspondence and memoranda during the rating period, he was charged with only one review inaccuracy as noted in a letter dated 5-11-66. This item has been fully considered, together with the huge work load of his Section and his over-all performance in this type of work, in rating him on item number 10 in "accuracy and attention to pertinent detail."

7. PARTICIPATION IN INFORMANT PROGRAMS:

N. A.

8. TESTIFYING EXPERIENCE AND ABILITY:

N. A.

9. ACCOUNTING INFORMATION:

N. A.

10. POLICE INSTRUCTION:

N. A.

11. RESIDENT AGENTS:

N. A.

flm  
Initials

12. EXPERIENCE AND ABILITY AS INSPECTOR'S AIDE:

N. A.

13. FOREIGN LANGUAGE ABILITY:

N. A.

Language in which proficient \_\_\_\_\_.

Completed language school ☐ Yes ☐ No

Fluent in \_\_\_\_\_ language to extent Agent can handle typical investigative problems as follows: (1) Conversation form ☐ Yes ☐ No

(2) Written form ☐ Yes ☐ No

Evaluate language proficiency in each phase as excellent, very good, good, fair or unsatisfactory

<u>Language</u>	<u>Read</u>	<u>Write</u>	<u>Speak</u>	<u>Understand</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Frequency \_\_\_\_\_ language ability used during rating period:

Frequency of use of \_\_\_\_\_ language ability anticipated during ensuing year:

14. ADMINISTRATIVE ADVANCEMENT:

- (a) Agent is interested in administrative advancement. ☒ Yes ☐ No
- (b) Agent is completely available for administrative advancement. ☒ Yes ☐ No
- (c) Agent is considered completely qualified at present for administrative advancement, including experience, ability, personality and appearance. ☒ Yes ☐ No
- (d) If answer to (c) is "Yes," Agent's qualifications are considered  
☐ very good ☒ excellent ☐ outstanding
- (e) If answer to (c) is "No," is Agent considered to have potential for future administrative advancement? (If applicable, explanatory comments required.) ☐ Yes ☐ No

5. personnel of the Tour Unit and the Correspondence and Tours Section were commended for handling a record number of tours during the summer of 1966. He was one of a group commended in a letter dated 8-31-66 for the preparation of comprehensive briefs in a matter of interest to the Bureau. By letter to him dated 7-12-66, the personnel of his Section were commended for the exemplary manner in which they performed over a sustained six-month period.

Jim  
Initials

UNITED STATES GOVERNMENT

# Memorandum

TO : Mr. DeLoach *DeLoach*

DATE: 3-31-67

FROM : R. E. Wick *Wick*

SUBJECT: DONALD C. MORRELL  
EOD 8-18-47  
SPECIAL AGENT, GS-15  
SECTION CHIEF, CORRESPONDENCE AND  
TOURS SECTION  
CRIME RECORDS DIVISION  
QUALITY WITHIN-GRADE SALARY INCREASE

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Wick *Wick*  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

Attached is the annual performance rating for Special Agent Donald C. Morrell covering his services from 4-1-66 through 3-31-67. During the entire period he has served in an outstanding fashion as the head of the Correspondence and Tours Section, where his record has been highlighted by expert guidance to his subordinates and utmost personal dedication to surmounting any continuing problems including extremely heavy work loads and numerous emergency deadlines. His personality and enthusiastic approach have earned him the respect and full cooperation of his associates, and the results of his personal effort and supervision have been most beneficial to the efficient operations of this Division during the past year.

Throughout the rating period his work has been of extraordinary quality, sustained over the entire period, and beyond the normal requirements of his assignments. While handling a record volume of work, he received only one letter of censure for a review error dated 5-11-66. This, of course, in view of his over-all performance and results achieved is in no way indicative of his attention to detail and accuracy and does not detract from his splendid work record during the entire rating period.

RECOMMENDATION:

REG-134

44-1042-188

That the attached performance rating for Special Agent Donald C. Morrell, Section Chief of the Correspondence and Tours Section, be approved and that he be considered for a quality within-grade salary increase in recognition of his sustained superior performance.

Enclosure

1 - Mr. Callahan

REW:ksf APR 25 1967  
(3)

*W* *3*

# FEDERAL BUREAU OF INVESTIGATION

NAME: LAST, FIRST, MIDDLE	SOCIAL SECURITY NUMBER
---------------------------	------------------------

## NOTIFICATION OF BASIC CHANGE

CODE - NATURE OF ACTION		EFFECTIVE DATE	DATE OF LAST EQUIV. INCR.
<input type="checkbox"/> 892 - QUALITY INCREASE	<input type="checkbox"/> 896 - ADMIN. PAY INCREASE		
<input type="checkbox"/> 893 - WITHIN GRADE INCREASE	<input type="checkbox"/> 897 - ADMIN. PAY DECREASE		
<input type="checkbox"/> 894 - PAY ADJUSTMENT	<input type="checkbox"/> OTHER (SPECIFY IN REMARKS)		
GRADE OR LEVEL	STEP OR RATE	OLD SALARY	NEW SALARY

## DATA ON UNPAID ABSENCE

PERIOD(S)	TOTAL EXCESS	IN PAY STATUS AT END OF WAITING PERIOD	INITIALS
			<i>J. Edgar Hoover</i>

☐ EMPLOYEE'S WORK IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.

☐ EMPLOYEE'S PERFORMANCE RATING IS SATISFACTORY OR BETTER.

REMARKS:

67-NOT RECORDED  
17 MAY 16 1967

*J. Edgar Hoover*

JOHN EDGAR HOOVER  
DIRECTOR

(DATE)

PERSONNEL FILE COPY



August 18, 1967

PERSONAL

Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

Dear Morrell:

It is indeed a pleasure to recognize your Twentieth Anniversary with the Federal Bureau of Investigation. I extend my sincere congratulations on this occasion and present to you this Twenty-Year Service Award Key as a token of our deep gratitude for your dedicated services.

I know that a great deal of hard work and many personal sacrifices on your part have been necessary in the performance of your duties. Your genuine interest in our problems and your enthusiasm for each new responsibility have enabled you to contribute to our accomplishments and augment our reputation. At the same time, through your cooperation and willingness to share your wide knowledge and experience with others, you have gained the highest esteem of your associates.

REC-130 100-442764-189  
This Key is a tangible symbol of the ideals of the Bureau and you are entitled to wear it with pride for your years of devoted work.

With best wishes and kind regards,

Sincerely,

*Lepr*

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Wick \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

Enclosure

1 - Mr. Bishop (Personal Attention)

LDH:jmc

(4)

67-421042-189

Salutation per file.

MAIL ROOM ☐ TELETYPE UNIT ☐

*Personally delivered to Mr. Bishop's office at 100-442764-189 jmc.*



**UNITED STATES DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION**

*In Reply, Please Refer to  
File No.*

Director  
Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C. 20535

Dear Sir:

For inclusion in the fund to be paid to the designated beneficiary of any Special Agent of the FBI who has previously contributed to this fund and who dies from any cause except self-destruction while employed as a Special Agent, I am forwarding herewith (by Check - Money Order) the sum of \$20, payable to S.A.I.F., to be included in said fund. Payment will be made for death by self-destruction after the Agent has been a member of the fund for a continuous period of two years. It is understood and agreed that the sum tendered herewith is a voluntary, gratuitous contribution to said fund which I understand is to be administered in the following manner.

The Director of the FBI will appoint a committee which shall consider all matters pertaining to the acquisition, safe keeping and expending of said fund, which committee will recommend appropriate action to the Director in pertinent matters. The Assistant Director of the Administrative Division of the FBI shall receive all contributions and account for same to the Director. Upon the death of any Special Agent who is a member of said fund the appointed committee will consider the case and submit a recommendation to the Director as to its conclusions. Appropriate instructions will then be issued to the Assistant Director of the Administrative Division, directing him to pay to the designated beneficiary the sum of \$20,000. The liability of the fund shall not under any circumstances exceed the amount of monies in the fund at the time any liability shall occur.

**EXECUTE IN DUPLICATE AND SUBMIT BOTH COPIES TO THE BUREAU**

Official Bureau Name (please type or print)	Date	Office of Assignment (or SOG Division)
SA Donald C. Morrell	6-1-67	Crime Records

The following person is designated as my beneficiary for Special Agents Insurance Fund:

Name (primary beneficiary; use given first name if female)	Relationship
Elizabeth H. Morrell	Wife

Address

5516 Charlcoate Road, Bethesda, Maryland 20034

Name (contingent beneficiary, if desired; use given first name if female)	Relationship	b6
	Daughter and Son	b7C

Address

Do you desire to designate the above-listed beneficiaries as the beneficiary and contingent beneficiary respectively of the Chas. S. Ross Fund as well? ☒ Yes ☐ No If not, the entire following portion must be executed.

The following person is designated as my beneficiary under the Chas. S. Ross Fund providing \$1500 death benefit to beneficiary of agents killed in the line of duty, other than travel accidents.

Name (primary beneficiary; use given first name if female)	Relationship

Address

Name (contingent beneficiary, if desired; use given first name if female)	Relationship

Address

Very truly yours,

Payment Received  
Special Agents Insurance Fund

JUN 3 1967

J. Edgar Hoover, Director

*Donald C. Morrell*  
Special Agent

5-1

Name: Donald C. Morrell

Title: Special Agent

EOD: 8/18/47

Grade: GS 15 at \$20,585

Veteran

Inspector in Charge Bishop: <sup>REB</sup> Mr. Morrell has been Chief of the Correspondence and Tours Section of the Crime Records Division since 3/14/60. He has an outstanding personal appearance, an engaging personality, and demonstrates skill in meeting deadlines and gaining full cooperation of his associates. He has handled extremely heavy work loads and prolonged emergency projects with resourcefulness and accuracy, and furnishes expert guidance to his subordinates. He has also served as Bureau representative to the Special Agents Mutual Benefit Association and during 1966 was Vice President of the FBI Recreation Association. His work on these two groups has been outstanding. Since his last performance rating, wherein he was rated "Excellent," by letter dated 4/11/67 he received a quality within-grade salary increase and no administrative action has been taken against him.

Rating: Excellent

Crime Records Division Inspection

9/19/67

TEB:mls

OCT 3 8 22 AM '67

REC'D

COMM DIA

607

ASSISTANT DIRECTOR W. M. FELT:  
(M. E. Light:wmj <sup>mel</sup> 9/27/67)

Mr. Morrell possesses an excellent personal appearance and evinces an engaging personality. He is a conscientious, dedicated administrator whose firm but fair supervision maintains for him the utmost respect, cooperation and confidence of his subordinates. His broad knowledge, experience and effective supervision bespeaks the high degree of sustained efficiency, accuracy and productivity achieved by the Correspondence and Tours Section under his able leadership. Mr. Morrell is considered to be wholly competent and eminently well qualified to continue in his present assignment or to assume a position entailing greater administrative responsibilities.



**UNITED STATES DEPARTMENT OF JUSTICE**  
**FEDERAL BUREAU OF INVESTIGATION**

*In Reply, Please Refer to  
File No.*

Director  
Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C. 20535

Dear Sir:

For inclusion in the fund to be paid to the designated beneficiary of any Special Agent of the FBI who has previously contributed to this fund and who dies from any cause except self-destruction while employed as a Special Agent, I am forwarding herewith (by Check - Money Order) the sum of \$20, payable to S.A.I.F., to be included in said fund. Payment will be made for death by self-destruction after the Agent has been a member of the fund for a continuous period of two years. It is understood and agreed that the sum tendered herewith is a voluntary, gratuitous contribution to said fund which I understand is to be administered in the following manner.

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**EXECUTE IN DUPLICATE AND SUBMIT BOTH COPIES TO THE BUREAU**

Official Bureau Name (please type or print)	Date	Office of Assignment (or SOG Division)
SA Donald C. Morrell	7-17-67	Crime Records

The following person is designated as my beneficiary for Special Agents Insurance Fund:

Name (primary beneficiary; use given first name if female)	Relationship
Elizabeth H. Morrell	Wife

Address

5516 Charlcoate Road, Bethesda, Maryland 20034

Name (contingent beneficiary, if desired; use given first name if female)	Relationship
[Redacted]	Son and Daughter

b6  
b7c

Address

[Redacted]

Do you desire to designate the above-listed beneficiaries as the beneficiary and contingent beneficiary respectively of the Chas. S. Ross Fund as well? ☒ Yes ☐ No If not, the entire following portion must be executed.

The following person is designated as my beneficiary under the Chas. S. Ross Fund providing \$1500 death benefit to beneficiary of agents killed in the line of duty, other than travel accidents.

Name (primary beneficiary; use given first name if female)	Relationship

Address

Name (contingent beneficiary, if desired; use given first name if female)	Relationship

Address

Very truly yours,

*Donald C. Morrell*

Special Agent

Special

20

2001

UNITED STATES GOVERNMENT

# Memorandum

TO : Mr. DeLoach

DATE: October 5, 1967

FROM : T. E. Bishop

SUBJECT: DONALD C. MORRELL  
EOD 8/18/47, GS-15  
SECTION CHIEF  
CORRESPONDENCE AND TOURS SECTION  
CRIME RECORDS DIVISION  
REALLOCATION

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Bishop \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

## PURPOSE:

To recommend that Section Chief Donald C. Morrell be favorably considered for reallocation to GS-16 in view of his outstanding work record and contribution to the overall best interests of the Bureau.

## BACKGROUND:

SA Morrell became Section Chief of the Correspondence and Tours Section in March, 1960. He has demonstrated executive competence, administrative ability, strong personality and success in obtaining results. Over the years he has had the overall responsibility for the exceptionally high volume of correspondence matters, as well as the Tour Unit with its correspondingly heavy activity each year. SA Morrell has the respect, loyalty and wholehearted support of his fellow workers.

SA Morrell received an Excellent rating on his 1967 Annual Efficiency Report, which comments remain applicable. He received a Quality Within-Grade Salary increase in recognition of his sustained superior performance on April 11, 1967. In the recently concluded inspection, the Inspector commented most favorably concerning Mr. Morrell's supervision and the accomplishments achieved in the Correspondence and Tours Section.

During 1966 SA Morrell served as Vice President of the FBI Recreation Association (FBIRA) and donated his time, services and

1 - Mr. DeLoach  
1 - Mr. Callahan

CONTINUED-OVER

TEB:ds  
(4)

REC-138  
107-421042-190  
memo typed to Mohr  
10/9/67  
EOW/KAL

3/ruv

Bishop to DeLoach Memo, 10/5/67

RE: Donald C. Morrell

Section Chief, Correspondence and Tours Section  
Reallocation

efforts in an outstanding manner. During the past eight years, SA Morrell has served on the Board of Directors of SAMBA, including the position of Secretary. Due to his specialized talents and administrative ability, he has been able to furnish excellent guidance in the formulation of the policies of SAMBA.

Mr. Morrell has been rated Excellent in his last four Annual Efficiency Reports and is within the desirable weight limits. He was promoted to Grade GS-15 on June 12, 1960.

RECOMMENDATION:

That Special Agent Donald C. Morrell, in his position as Chief of the Correspondence and Tours Section, be favorably considered for promotion to GS-16 at this time.

*[Handwritten initials: "H" with a diagonal line through it]* *[Handwritten initials: "FB"]* *[Handwritten initials: "AS"]*

UNITED STATES GOVERNMENT

# Memorandum

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Bishop \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

TO : MR. MOHR

DATE: 10/9/67

FROM : W. S. HYDE

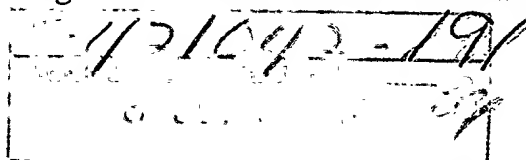
SUBJECT: SA DONALD C. MORRELL  
Section Chief  
Correspondence and Tours Section  
Crime Records Division  
EOD 8/18/47, GS-15, \$20,585

The purpose of this memo is to recommend that SA Donald C. Morrell, who has been Section Chief of the Correspondence and Tours Section, Crime Records Division, since March 1960, be reallocated from Grade GS-15 to GS-16. Assistant to the Director DeLoach and Inspector in Charge Bishop similarly recommend this action.

SA Donald C. Morrell entered on duty 8/18/47, is in Grade GS-15, \$20,585, 49 years old, born in Brooklyn, New York, married with two children, and has Bachelor of Arts and Bachelor of Laws degrees. He served in three field offices and for seven years in the Administrative Division prior to his transfer to Crime Records Division in March 1960. As Section Chief, SA Morrell administers a very large section, comprised of 9 Special Agents and 69 clerical employees, in addition to his over-all responsibility for the Tour Unit, which averages as many as 35 additional Tour Leader personnel on a loan basis from other divisions. SA Morrell has an extremely fine over-all Bureau record. Although censured on 13 occasions, most of these were for correspondence errors and he has not been censured since 5/11/66, which was for preparing an outgoing communication containing inaccurate information. On the other hand, SA Morrell has been commended on 13 separate occasions. In addition, he received the rating of Excellent on his 1967 Annual Performance Rating dated 3/31/67, and in connection therewith he received a quality within-grade salary increase in recognition of his sustained superior performance. By letter dated 4/12/67 SA Morrell expressed his deep appreciation to the Director for this recognition. Since taking over as Section Chief, Inspectors' comments concerning his direction of the section's responsibilities have been most favorable. During the last inspection of the Crime Records Division in September 1967, the Inspector stated that he was a conscientious, dedicated administrator, who was considered wholly competent and eminently well qualified to continue in his present assignment or assume a position entailing greater administrative responsibilities. SA Morrell, during 1966, served as Vice President of the FBI Recreation Association (FBIRA) contributing his time and efforts in an outstanding manner to FBIRA affairs. During the past 8 years, SA Morrell has served on the Board of Directors of the Special Agents Mutual Benefit Association (SAMBA)

EWV:lae(2)

REC-133



2 att

OVER---



W. S. HYDE TO MR. MOHR

including the position of Secretary. He has furnished excellent guidance and has made a number of fine contributions to the formulation of the policies of SAMBA. SA Morrell has been in Grade GS-15 since 6/12/60.

RECOMMENDATION:

That SA Donald C. Morrell be reallocated from Grade GS-15 to Grade GS-16 as Section Chief, Correspondence and Tours Section, Crime Records Division.

*Letter Prep.  
10-11-67  
msw*

*P*

*PM*

*✓*

*NR*

PERMANENT BRIEF ATTACHED

*GR.  
H*

Mr. Tolson	_____
Mr. DeLoach	_____
Mr. Mohr	_____
Mr. Bishop	_____
Mr. Casper	_____
Mr. Callahan	_____
Mr. Conrad	_____
Mr. Felt	_____
Mr. Gale	_____
Mr. Rosen	_____
Mr. Sullivan	_____
Mr. Tavel	_____
Mr. Trotter	_____
Tele. Room	_____
Miss Holmes	_____
Miss Gandy	_____

October 11, 1967

*Handwritten signature*

Honorable John Edgar Hoover  
Director  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Hoover:

Today I received your most welcome letter of October 11th advising me of my reallocation to grade GS-16.

I cannot adequately express my deep appreciation for your kindness and want to give you every assurance that I will rededicate myself to carrying out the responsibilities you have entrusted to me with every measure of my capability.

Sincerely yours,

*Donald C. Morrell*

Donald C. Morrell  
CRIME RECORDS DIVISION

421042-192

REC-133

3

EXP. PROC.

OCT 11 1967 36

*Handwritten initials*

October 11, 1967

PERSONAL

Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

Dear Morrell:

I am indeed pleased to advise you of your promotion to Grade GS 10, \$22,035 per annum, as Supervisory Special Agent (Chief of the Correspondence and Tours Section), effective this date.

This promotion is temporary and will remain in effect only for the duration of your present assignment.

Sincerely,

J. Edgar Hoover

1 - Mr. DeLoach (PERSONAL ATTENTION)

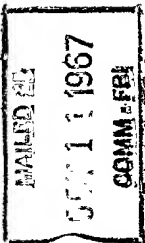
1 - Mr. Bishop (PERSONAL ATTENTION)

1 -

1 - Movement

1 -

b6  
b7c



Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Bishop \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

MAIL ROOM ☐ TELETYPE UNIT ☐

(SE)

1. NAME (LAST-FIRST-MIDDLE) <b>MORRELL, DONALD C. (MR.)</b>		2. (FOR AGENCY USE)		3. BIRTH DATE (Mo., Day, Year) <b>6-13-18</b>	4. SOCIAL SECURITY NO. <b>100-03-8019</b>
5. VETERAN PREFERENCE <b>2</b> 1—NO 2—5 PT. 3—10 PT. DISAB. 4—10 PT. COMP. 5—10 PT. OTHER		6. TENURE GROUP		7. SERVICE COMP. DATE	8. PHYSICAL HANDICAP CODE
9. FEGLI 1—COVERED 2—INELIGIBLE 3—WAIVED		10. RETIREMENT 1—CS 2—FICA 3—FS 4—NONE 5—OTHER		11. (FOR CSC USE)	
12. CODE NATURE OF ACTION <b>PROMOTION</b>		13. EFFECTIVE DATE (Mo., Day, Year) <b>10-11-67</b>		14. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>EXCEPTED BY LAW</b>	
15. FROM: POSITION TITLE AND NUMBER <b>Supervisory Special Agent 61-F-114 160</b>		16. PAY PLAN AND OCCUPATION CODE <b>GS Series 1811</b>		17. (a) GRADE OR LEVEL <b>15</b>	(b) STEP OR RATE <b>6</b>
				18. SALARY <b>\$20,585 pa</b>	
19. NAME AND LOCATION OF EMPLOYING OFFICE					

20. TO: POSITION TITLE AND NUMBER <b>Supervisory Special Agent (Chief of the Correspondence and Tours Section) 160</b>		21. PAY PLAN AND OCCUPATION CODE <b>GS</b>		22. (a) GRADE OR LEVEL <b>16</b>	(b) STEP OR RATE <b>4</b>	23. SALARY <b>\$22,085 pa</b>
24. NAME AND LOCATION OF EMPLOYING OFFICE						

25. DUTY STATION (City—county—State)			26. LOCATION CODE		
27. APPROPRIATION <b>S. &amp; E., FBI</b>			28. POSITION OCCUPIED 1—COMPETITIVE SERVICE 2—EXCEPTED SERVICE		29. APPORTIONED POSITION FROM: TO: STATE 1—PROVED-1 2—WAIVED-2
30. REMARKS: A. SUBJECT TO COMPLETION OF 1 YEAR PROBATIONARY (OR TRIAL) PERIOD COMMENCING B. SERVICE COUNTING TOWARD CAREER (OR PERMANENT) TENURE FROM: C. DURING PROBATION D. FROM APPOINTMENT OF 6 MONTHS OR LESS					
SEPARATIONS: SHOW REASONS BELOW, AS REQUIRED. CHECK IF APPLICABLE:					

This promotion is temporary and will remain in effect only for the duration of present assignment. Upon conclusion of present assignment, employee will be allocated to permanent grade level.

Basis for this position is Section 505 (e) of the Classification Act of 1949 as amended.

31. DATE OF APPOINTMENT AFFIDAVIT (Accession only) <b>12 NOV 7 1967</b>		34. SIGNATURE (Or other authentication) AND TITLE <b>J. E. Hoover Director</b>	
32. OFFICE MAINTAINING PERSONNEL FOLDER (If different from employing office)		35. DATE <b>10-17-67</b>	
33. CODE <b>DJ 02</b>	EMPLOYING DEPARTMENT OR AGENCY <b>FEDERAL BUREAU OF INVESTIGATION WASHINGTON, D.C. 20535</b>		

TO: Director, FBI

FROM: DONALD C. MORRELL

CERTIFICATION

TO BE FILLED IN BY OPERATOR	Name of Operator (Print - Last, First, Middle Initial) <u>MORRELL, DONALD C.</u>		Date <u>3/30/68</u>
	Division and Section Assigned <u>CRIME RECORDS ; CORRESPONDENCE + TOURS</u>		<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Clerk
	This is to certify that I presently hold a valid motor vehicle operator's permit or driver's license as follows:		
	Permit Issued By: (State, Territory Possession, District) <u>MARYLAND</u>	Permit Number <u>M-640-149-119-442R</u>	Permit Expires <u>JUN 1968</u>
	This is an <input checked="" type="checkbox"/> unrestricted <input type="checkbox"/> restricted permit. (If restricted, explain below)		
<input type="checkbox"/> Glasses <input type="checkbox"/> Contact lenses are required for driving <input type="checkbox"/> Yes <input type="checkbox"/> No			
<p>This further certifies that during the past three years I have driven a motor vehicle (government or personally owned) approximately <u>50,000</u> miles. During this time (a) I <input type="checkbox"/> have <input checked="" type="checkbox"/> have not received a traffic violation ticket; (b) I <input type="checkbox"/> have <input checked="" type="checkbox"/> have not been held at fault* as the driver of a motor vehicle involved in a traffic accident. (If affirmative answer, explain below, giving number and dates of offenses.) I further understand that when operating a Government vehicle I must assume responsibility for payment of any damage to same should I be found at fault.* I also understand the Government does not provide insurance coverage for damage to its vehicles.</p>			
<p>* "At fault" means any case in which responsibility is conceded by employee or his insurance company or liability is fixed by duly constituted authority or administratively by the Bureau.</p>			
<p style="text-align: right;"><u>Donald C. Morrell</u> Signature of Operator</p>			

TO BE FILLED IN BY REVIEWING OFFICIAL	The personnel file of this employee has been reviewed and indicates the following information concerning the operation of a motor vehicle during the past three years:	
	<input checked="" type="checkbox"/> Continuous safe driving record	
	<input type="checkbox"/> Involved in traffic accident and found at fault**	
	I certify that this employee is:	
	<input checked="" type="checkbox"/> Qualified on the basis of his safe driving record to operate motor vehicles on official business	
<input type="checkbox"/> Not qualified and must demonstrate his qualifications by satisfactorily passing a road test examination before operating a motor vehicle on official business		
Remarks:		
<input type="checkbox"/> Issue <input type="checkbox"/> Renew Operator's Identification Card - SF-46		
<p style="text-align: center;">10 APR 1968</p>		
<p>** "At fault" means any case in which the Bureau has taken disciplinary administrative action against the employee.</p>		
(Over for Operator's Road Test Score Sheet)		
<p style="text-align: right;"><u>Thomas E. Bishop</u> Official Signature of Reviewing Official</p>		
<p style="text-align: right;">Title <u>Inspector in Charge</u> Date <u>4-2-68</u></p>		

# RESULTS OF ROAD TEST

Vehicle Used in Test				Local of Test	
Make	Body Type	Year	City	State	
Transmission <input type="checkbox"/> Automatic <input type="checkbox"/> Manual		Date	Time	Examiner's Signature	

**Instructions to Examiner**  
 Place check mark (✓) in space beside each error committed. If same error is repeated, add a check mark for each repetition. Multiply point value of each error (shown in box at left of each error listing) by number of check marks, placing total points for each category in box at lower right of each block. To obtain final score, total number of points scored in all categories.

**PASSING GRADE: Total Score of 25 Points or Less**  
**FAILING GRADE: Total Score of 26 Points or More**  
**Note Results in Box at Right of Instruction Block**

**TEST SCORE**

Total Error Points :  

Pass ☐  
 Fail ☐

Check List	
<p><b>1. Checking Vehicle</b></p> <p>Fails to: <span style="border: 1px solid black; padding: 0 5px;">1</span> ____ Adjust Rear-view Mirror  <span style="border: 1px solid black; padding: 0 5px;">1</span> ____ Adjust Seat Properly  <span style="border: 1px solid black; padding: 0 5px;">1</span> ____ Check Effectiveness of Hand &amp; Foot Brake  <span style="border: 1px solid black; padding: 0 5px;">1</span> ____ Check Windshield Wipers  <span style="border: 1px solid black; padding: 0 5px;">1</span> ____ Check Horn and All Lights</p> <div style="text-align: right; border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"># of Points</div>	<p><b>2. Leaving Curb</b></p> <p>Fails to: <span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Look Back to Check Traffic  <span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Give Proper Signal (Mechanical or Hand)  <span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Wait for Approaching Traffic</p> <div style="text-align: right; border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"># of Points</div>
<p><b>3. Turning</b></p> <p>Fails to: <span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Give Proper Signal (Mechanical or Hand)  <span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Turn Carefully From Proper Lane</p> <div style="text-align: right; border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"># of Points</div>	<p><b>4. Backing</b></p> <p>Fails to: <span style="border: 1px solid black; padding: 0 5px;">1</span> ____ Observe Surrounding Conditions  <span style="border: 1px solid black; padding: 0 5px;">1</span> ____ Back Slowly and Smoothly and Avoid Excessive Curb Contact</p> <div style="text-align: right; border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"># of Points</div>
<p><b>5. Controls</b></p> <p>Fails to: <span style="border: 1px solid black; padding: 0 5px;">1</span> ____ Handle Vehicle Smoothly  <span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Keep Both Hands on Wheel  <span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Smoothly Engage Shifting Mechanism  <span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Use Brakes Properly</p> <div style="text-align: right; border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"># of Points</div>	<p><b>6. Speed</b></p> <p><span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Exceeds Limit  <span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Too Slow for Traffic Conditions  <span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Too Fast for Traffic Conditions</p> <div style="text-align: right; border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"># of Points</div>
<p><b>7. Position on Roadway</b></p> <p><span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Follows too Closely  <span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Fails to Hold Proper Lane  <span style="border: 1px solid black; padding: 0 5px;">1</span> ____ Straddles Lane Markings</p> <div style="text-align: right; border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"># of Points</div>	<p><b>8. Overtaking - Passing</b></p> <p><span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Misjudges Speed of Oncoming Traffic  <span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Passes in Intersection, on Hill, Curve, etc.  <span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Cuts in too Soon  <span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Fails to Signal (Hand, Light, Horn) When Conditions Warrant</p> <div style="text-align: right; border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"># of Points</div>
<p><b>9. Parking</b></p> <p>Fails to: <span style="border: 1px solid black; padding: 0 5px;">1</span> ____ Avoid Violent Bumping of Other Cars or Excessive Scraping of Curb  <span style="border: 1px solid black; padding: 0 5px;">1</span> ____ Set Hand Brake  <span style="border: 1px solid black; padding: 0 5px;">1</span> ____ Cramp Wheels Where Necessary</p> <div style="text-align: right; border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"># of Points</div>	<p><b>10. Railroad and School Zones</b></p> <p>Fails to: <span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Obey Signals and Caution Warnings  <span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Be Alert for Unusual Conditions</p> <div style="text-align: right; border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"># of Points</div>
<p><b>11. Attention</b></p> <p>Fails to: <span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Anticipate Hazardous Traffic Conditions (Including Pedestrians)  <span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Keep Full Attention on Operation of Car  <span style="border: 1px solid black; padding: 0 5px;">1</span> ____ Limit Talking to Minimum  <span style="border: 1px solid black; padding: 0 5px;">2</span> ____ Observe Posted Signs or Signals</p> <div style="text-align: right; border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"># of Points</div>	<p><b>12. General</b></p> <p><span style="border: 1px solid black; padding: 0 5px;">3</span> ____ Nervous and Hesitant While Operating at Maximum Speeds Allowed on Open Highway  <span style="border: 1px solid black; padding: 0 5px;">3</span> ____ Lack of Caution  <span style="border: 1px solid black; padding: 0 5px;">3</span> ____ Timidity or Lack of Assurance Under Normal Driving Conditions</p> <div style="text-align: right; border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"># of Points</div>

Remarks:

**ELECTION, DECLINATION, OR WAIVER  
OF LIFE INSURANCE COVERAGE**  
FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM

**IMPORTANT  
AGENCY INSTRUCTIONS  
ON BACK OF ORIGINAL**

**TO COMPLETE THIS FORM—**

**1**

**FOLLOW THESE GENERAL INSTRUCTIONS:**

- Read the back of the "Duplicate" carefully before you fill in the form.
- Fill in BOTH COPIES of the form. Type or use ink.
- Do not detach any part.

**2**

**FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):**

NAME (last) (first) (middle)	DATE OF BIRTH (month, day, year)	SOCIAL SECURITY NUMBER
MORRELL, DONALD CLARK	JUNE 13, 1918	100   03   8019
EMPLOYING DEPARTMENT OR AGENCY	LOCATION (City, State, ZIP Code)	
FBI - JUSTICE	WASHINGTON, D.C. 20535	

**3**

**MARK AN "X" IN ONE OF THE BOXES BELOW (do NOT mark more than one):**

Mark here  
if you  
**WANT BOTH**  
optional and  
regular  
insurance

☐  
**(A)**

**ELECTION OF OPTIONAL (IN ADDITION TO REGULAR) INSURANCE**

I elect the \$10,000 additional optional insurance and authorize the required deductions from my salary, compensation, or annuity to pay the full cost of the optional insurance. This optional insurance is in addition to my regular insurance.

Mark here  
if you  
**DO NOT WANT**  
**OPTIONAL** but  
do want  
regular  
insurance

☒  
**(B)**

**DECLINATION OF OPTIONAL (BUT NOT REGULAR) INSURANCE**

I decline the \$10,000 additional optional insurance. I understand that I cannot elect optional insurance until at least 1 year after the effective date of this declination and unless at the time I apply for it I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of additional optional insurance.

Mark here  
if you  
**WANT NEITHER**  
regular nor  
optional  
insurance

☐  
**(C)**

**WAIVER OF LIFE INSURANCE COVERAGE**

I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the \$10,000 additional optional insurance unless I have the regular insurance.

**4**

**SIGN AND DATE. IF YOU MARKED BOX "A" OR "C",  
COMPLETE THE "STATISTICAL STUB." THEN RETURN  
THE ENTIRE FORM TO YOUR EMPLOYING OFFICE.**

SIGNATURE (do not print)

Donald Clark Morrell

DATE

February 6, 1968

**FOR EMPLOYING OFFICE USE ONLY**

(official receiving date stamp)

**FEB 12 1968**

See Table of Effective Dates on back of Original

**ORIGINAL COPY—Retain in Official Personnel Folder**

STANDARD FORM No. 176-T  
JANUARY 1968  
(For use only until April 14, 1968)  
176-101

## INSTRUCTIONS TO EMPLOYING AGENCY

1. **Who must file.**—All employees not excluded by law or regulation from insurance coverage, including those who have previously waived coverage, are required to complete and file Standard Form 176-T. Employees who are in the service on February 14, 1968, as well as those who are appointed after that date but before April 14, 1968, must file the form.
2. **Automatic cancellation of previously filed waivers.**—All "Waivers of Life Insurance Coverage" (SF 53) on file are automatically canceled as of the first day of the first pay period beginning on or after February 14, 1968. Payroll offices are to begin regular insurance deductions on the automatic cancellation date for employees who do not file a new waiver, i.e., those who do not check box **C** of SF 176-T, on or before that date.
3. **Employees failing to file.**—If an employee does not return a completed SF 176-T, contact him and urge him to do so even if he does not want optional insurance (he will, of course, be automatically covered for regular insurance). If he still fails to file SF 176-T by April 14, 1968, or 31 days after appointment, whichever is later, file one for him as of that date: mark box **B**, and note in the space provided for his signature "employee contacted—failed to elect optional insurance." See note 2 below.
4. **Review of completed forms.**—(a) Review both copies of the SF 176-T for legibility, completeness, and consistency. Reconcile with the employee any obvious major discrepancy such as a mark in more than one box.  
(b) If the employee marked box **A** or box **C**, make sure the Statistical Stub is complete. Then detach and mail stubs, in a bundle, weekly to:  
Office of Federal Employees' Group Life Insurance  
(Statistical Study)  
4 East 24th Street  
New York, New York 10010  
(c) If the employee marked box **B**, detach and destroy the stub.
5. **Date of receipt and effective date.**—(a) Stamp date of receipt by employing office in the space provided for this purpose on both the Original and the Duplicate.  
(b) The effective date is determined from the table below.
6. **Disposition of forms.**—(a) File the Original SF 176-T in the official personnel folder in all cases.  
(b) Any necessary payroll change, with effective date, may be posted in the space reserved on the Duplicate for employing office.  
(c) The Duplicate may be destroyed, if no payroll action is required, or after the requirements of the agency's payroll system have been met.
7. **Use of SF 176-T.**—SF 176-T "Election, Declination, or Waiver of Life Insurance Coverage" should not be used after the initial filing period (after April 14, 1968). A revised edition will be available for use after that date.

### TABLE OF EFFECTIVE DATES

DATE SF 176-T RECEIVED BY EMPLOYING OFFICE	EMPLOYEE'S DECISION	EFFECTIVE DATE (IF NO WAIVER, SF 53, IN EFFECT)	
		OF DECISION	OF DEDUCTIONS
On or before February 14, 1968.	Elects optional (in addition to regular) (box <b>A</b> ).	Coverage effective February 14, 1968.	Deductions begin 1st day of 1st pay period beginning on or after February 14, 1968.
	Declines optional (but not regular) (box <b>B</b> ).	Declination effective February 14, 1968.	
	Waives regular (so ineligible for optional) (box <b>C</b> ).	Waiver effective last day of pay period in which February 14, 1968 falls.	Deductions stop last day of pay period in which February 14, 1968 falls.
After February 14 but not later than April 14, 1968.	Elects optional (in addition to regular) (box <b>A</b> ).	Coverage effective on date of receipt.	Deductions begin 1st day of 1st pay period beginning on or after date of receipt.
	Declines optional (but not regular) (box <b>B</b> ).	Declination effective on date of receipt, but employee loses automatic optional protection on February 14, 1968.	
	Cancels previously elected optional (but not regular) (box <b>B</b> ).	Cancellation effective last day of pay period in which received.	Deductions for optional stop last day of pay period in which received.
	Waives regular (so ineligible for optional) (box <b>C</b> ).	Waiver effective last day of pay period in which received.	Deductions stop last day of pay period in which received.

- NOTES: 1. Because regular insurance coverage and deductions are automatic unless waived (by checking box **C**), **A** and **B** elections do not affect regular insurance effective dates.
2. An employee for whom the agency files SF 176-T because he failed to file is deemed to have declined optional, but not regular, insurance.
3. An employee with an uncanceled waiver (SF 53) on file cannot be insured any earlier than the first day he is in duty and pay status in a pay period beginning on or after February 14, 1968; filing of an SF 176-T before that date will not cancel an SF 53 any earlier. Deductions begin the day he becomes insured.
4. The effective date of regular (and optional) insurance coverage for an employee who has been on leave without pay for more than 1 year is the first day he is in pay and duty status. Deductions are effective the same day.



Mr. Tolson	✓
Mr. DeLoach	✓
Mr. Mohr	✓
Mr. Bishop	✓
Mr. Casper	✓
Mr. Callahan	✓
Mr. Conrad	✓
Mr. Felt	✓
Mr. Gale	✓
Mr. Rosen	✓
Mr. Sullivan	✓
Mr. Tavel	✓
Mr. Trotter	✓
Tele. Room	✓
Miss Holmes	✓
Miss Gandy	✓

*File*

March 29, 1968

*✓ R. A. Jones*

Honorable John Edgar Hoover  
 Director  
 Federal Bureau of Investigation  
 Washington, D. C.

Dear Mr. Hoover:

About twenty years ago I received one of your autographed photographs, and over the years it has become faded. My wife and I would very much appreciate it if you could find the time to send us another one in color. This would mean a great deal to us, and if it would not be an imposition on you, I would request it be autographed to Betty and Don Morrell.

Thank you very much for your consideration.

Sincerely yours,

*Donald C. Morrell*

Donald C. Morrell  
 SECTION CHIEF - CORRESPONDENCE + TOURS  
 CRIME RECORDS DIVISION

67- 147-1045-195  
 Searched \_\_\_\_\_ Indexed \_\_\_\_\_  
 1 APR 4 1968

MAILED 12  
 APR 2 1968  
 COMM-FBI

*m r*

*rec'd photo. 10-20-48  
 auto. photo. made  
 prepared 4-2-68*

*APR 10 1968*

*-a*

*TSB*

APR 1 1968

FEDERAL BUREAU OF INVESTIGATION  
UNITED STATES DEPARTMENT OF JUSTICE

## REPORT OF PERFORMANCE RATING

b6  
b7cName of Employee: Donald C. MorrellWhere Assigned: Crime Records Correspondence & Tours  
(Division) (Section, Unit)Official Position Title and Grade: Special Agent - Section Chief, GS-16Rating Period: from 4-1-67 to 3-31-68ADJECTIVE RATING: EXCELLENT  
Outstanding, Excellent, Satisfactory, UnsatisfactoryEmployee's  
InitialsDCM

Rated by:

Thomas E. Bishop  
SignatureInspector in Charge  
Title4-2-68  
Date

Reviewed by:

Signature

Title

Assistant Director

APR 11 1968  
Date

Rating Approved by:

Signature

Title

Date

## TYPE OF REPORT

☒ Official  
☒ Annual☐ Administrative  
☐ 60-Day  
☐ 90-Day  
☐ Transfer  
☐ Separation from Service  
☐ Special4-310-112-1944  
100  
67

# PERFORMANCE RATING GUIDE FOR INVESTIGATIVE PERSONNEL

(For use as attachment to Performance Rating Form No. FD-185)

Name of Employee Donald C. Morrell

## RATING GUIDE AND CHECK-LIST

Note: Only those items having pertinent bearing on employee's performance should be rated. All employees in same salary grade should be compared.

### RATE ITEMS AS FOLLOWS:

- + Outstanding (exceeding excellent and deserving of special commendation).  
E Excellent.  
✓ Satisfactory (good or very good).  
- Unsatisfactory.  
O No opportunity to appraise performance during rating period.

### Guide for determining adjective rating:

- "Outstanding" adjective rating requires (A) that all elements be + and (B) that each and every rated element be factually justified by narrative details, including reasons for considering each worthy of Special Commendation and be attached to FD-185a.
- "Excellent," "Satisfactory" or "Unsatisfactory" adjective ratings will depend upon the composite result of evaluating all rated elements rather than following any mechanical formulas; however, for an employee to be rated "Excellent" he must not be rated unsatisfactory on any performance evaluation factors on the rating guide and check-list and must be rated "Excellent" or "Outstanding" on the majority of such rating factors. Good judgment must be exercised to insure that adjective rating is reasonable in the light of elements rated.
  - Any element rated "Unsatisfactory" must be supported by narrative comments.
  - An official rating of "Unsatisfactory" must be supported in writing stating (1) wherein the performance is unsatisfactory, (2) the facts of the (90-day) prior warning, and (3) the efforts made after the warning to help the employee bring his performance up to a satisfactory level and must be attached to FD-185a.

- |   |   |
|---|---|
| <u>+</u> (1) Personal appearance.   | <u>E</u> (16) Firearms ability.   |
| <u>+</u> (2) Personality and effectiveness of his personal contacts.  | <u>O</u> (17) Development of informants and sources of information.   |
| <u>+</u> (3) Attitude (including dependability, cooperativeness, loyalty, enthusiasm, amenability and willingness to equitably share work load).  | <u>+</u> (18) Reporting ability: <ul style="list-style-type: none"> <li><u>O</u> (a) Investigative reports</li> <li><u>O</u> (b) Summary reports</li> <li><u>+</u> (c) Memos, letters, wires</li> </ul> (Consider: <u>+</u> conciseness; <u>+</u> clarity; <u>+</u> organization; <u>+</u> thoroughness; <u>+</u> accuracy; <u>+</u> adequacy and pertinency of leads; <u>+</u> administrative detail.)   |
| <u>+</u> (4) Physical fitness (including health, energy, stamina).  | <u>O</u> (19) Performance as a witness.   |
| <u>+</u> (5) Resourcefulness and ingenuity.   | <u>+</u> (20) Executive ability: <ul style="list-style-type: none"> <li><u>+</u> (a) Leadership</li> <li><u>+</u> (b) Ability to handle personnel</li> <li><u>+</u> (c) Planning</li> <li><u>+</u> (d) Making decisions</li> <li><u>+</u> (e) Assignment of work</li> <li><u>+</u> (f) Training subordinates</li> <li><u>+</u> (g) Devising procedures</li> <li><u>+</u> (h) Emotional stability</li> <li><u>+</u> (i) Promoting high morale</li> <li><u>+</u> (j) Getting results</li> </ul> |
| <u>+</u> (6) Forcefulness and aggressiveness as required.   | <u>O</u> (21) Ability on raids and dangerous assignments: <ul style="list-style-type: none"> <li><u>+</u> (a) As leader</li> <li><u>+</u> (b) As participant</li> </ul>   |
| <u>+</u> (7) Judgment, including common sense, ability to arrive at proper conclusions, ability to define objectives.   | <u>+</u> (22) Organizational interest, such as making of suggestions for improvement.   |
| <u>+</u> (8) Initiative and the taking of appropriate action on own responsibility.   | <u>+</u> (23) Ability to work under pressure.   |
| <u>+</u> (9) Planning ability and its application to the work.  | <u>+</u> (24) Miscellaneous. Specify and rate: <ul style="list-style-type: none"> <li><u>+</u> Dictation ability</li> </ul>   |
| <u>+</u> (10) Accuracy and attention to pertinent detail.   |   |
| <u>+</u> (11) Industry, including energetic, consistent application to duties.  |   |
| <u>+</u> (12) Productivity, including amount of acceptable work produced and rate of progress on or completion of assignments. Also consider adherence to deadlines unless failure to meet is attributable to causes beyond employee's control.   |   |
| <u>+</u> (13) Knowledge of duties, instructions, rules and regulations, including readiness of comprehension and "know how" of application.   |   |
| <u>O</u> (14) Investigative ability and results: <ul style="list-style-type: none"> <li><u>+</u> (a) Internal security cases</li> <li><u>+</u> (b) Criminal or general investigative cases</li> <li><u>+</u> (c) Fugitive cases</li> <li><u>+</u> (d) Applicant cases</li> <li><u>+</u> (e) Accounting cases</li> </ul> |   |
| <u>O</u> (15) Physical surveillance ability.  |   |

- A. Specify general nature of assignment during most of rating period (such as security, criminal, applicant squad, or as Resident Agent, supervisor, instructor, etc.):

## Section Chief - Correspondence and Tours Section

- B. Specify employee's most noteworthy special talents (such as investigator, desk man, research, instructor, speaker):

## Administrator, Desk Man

- C. (1) Is employee available for general assignment wherever needs of service require? Yes (If answer is not "yes," explain in narrative comments.)  
 (2) Is employee available for special assignment wherever needs of service require? Yes (If answer is not "yes," explain in narrative comments.)
- D. 1. Has employee had an abnormal sick leave record during rating period? No 2. Has employee used more sick leave (including annual leave or LWOP for illness) during rating period than the amount of sick leave earned during such period? No (If answer to either question is "yes," explain in narrative comments.)
- E. Is employee qualified to operate a motor vehicle incidental to his official duties? ☒ Yes ☐ No  
 If answer is "yes," personnel file must reflect the following: (a) Has valid State or local operator's license for type vehicle he is to use.  
 (b) Is physically fit to drive. (c) Past safe driving record OK or has passed Bureau road test.

ADJECTIVE RATING: EXCELLENT  
 Outstanding, Excellent, Satisfactory, Unsatisfactory

EMPLOYEE'S INITIALS DCM

## NARRATIVE COMMENTS

1. PERSONAL APPEARANCE AND PERSONALITY: This Agent makes an excellent personal appearance and his personable and enthusiastic approach are most valuable in most effectively fulfilling his responsibilities.
2. ABILITY TO PARTICIPATE IN RAIDS AND DANGEROUS ASSIGNMENTS:  
N. A.
3. LIMITATIONS ON AVAILABILITY; PHYSICAL LIMITATIONS AFFECTING PERFORMANCE; AND SICK LEAVE INFORMATION: He is available for regular or special assignment wherever his services may be needed. His physical condition is such as to enable him to handle any type of assignment. His sick leave record is good.
4. TYPE OF CASES OR WORK HANDLED AND APPRAISAL OF OVER-ALL PERFORMANCE, INCLUDING ABILITY TO HANDLE COMPLICATED INVESTIGATIVE MATTERS AND SUPERVISION REQUIRED: During the rating period, Mr. Morrell has served as Section Chief of the Correspondence and Tours Section. He has distinguished himself in this capacity for his executive ability, administrative proficiency and personal leadership in handling the heavy volume of work and responsibilities in the Section.

He not only supervises the voluminous correspondence program, but also the Bureau's tour program. Mr. Morrell utilizes excellent judgment and common sense in planning and programming the work in his Section. He is most competent and the outstanding results achieved in the Section can be attributed to his foresight and loyal support from his associates.

During this rating period Mr. Morrell has also represented the Bureau in the Special Agents Mutual Benefit Association and in this role has been responsible for achieving benefits for Bureau personnel.

*DM*  
Initials

5. NUMBER OF INCENTIVE AWARDS AND COMMENDATIONS RECEIVED: By letter dated October 11, 1967, Mr. Morrell was promoted to Grade GS-16.

6. DISCIPLINARY ACTION AND JUSTIFICATION FOR ANY UNSATISFACTORY ITEMS:  
(List items taken into consideration on rating guide and check list.)

N. A.

7. PARTICIPATION IN INFORMANT PROGRAMS:

N. A.

8. TESTIFYING EXPERIENCE AND ABILITY:

N. A.

9. ACCOUNTING INFORMATION:

N. A.

10. POLICE INSTRUCTION:

N. A.

11. RESIDENT AGENTS:

N. A.

gcm  
Initials

12. EXPERIENCE AND ABILITY AS INSPECTOR'S AIDE: Mr. Morrell is a qualified Inspector's Aide although he has not been utilized on such an assignment during the rating period.

13. FOREIGN LANGUAGE ABILITY:

Language in which proficient None

Completed language school ☐ Yes ☐ No

Fluent in \_\_\_\_\_ language to extent Agent can handle typical investigative problems as follows: (1) Conversation form ☐ Yes ☐ No

(2) Written form ☐ Yes ☐ No

Evaluate language proficiency in each phase as excellent, very good, good, fair or unsatisfactory

Language

Read

Write

Speak

Understand

Spanish

Unsatisfactory

Frequency \_\_\_\_\_ language ability used during rating period:

Frequency of use of \_\_\_\_\_ language ability anticipated during ensuing year:

14. ADMINISTRATIVE ADVANCEMENT:

(a) Agent is interested in administrative advancement. ☒ Yes ☐ No

(b) Agent is completely available for administrative advancement. ☒ Yes ☐ No

(c) Agent is considered completely qualified at present for administrative advancement, including experience, ability, personality and appearance. ☒ Yes ☐ No

(d) If answer to (c) is "Yes," Agent's qualifications are considered  
☐ very good ☒ excellent ☐ outstanding

(e) If answer to (c) is "No," is Agent considered to have potential for future administrative advancement? (If applicable, explanatory comments required.) ☐ Yes ☐ No

OCM  
Initials

# REPORT OF MEDICAL EXAMINATION

# FBI

88-108

1. LAST NAME—FIRST NAME—MIDDLE NAME <b>Morrell, Donald Clark</b>			2. GRADE AND COMPONENT OR POSITION <b>SA</b>		3. IDENTIFICATION NO. <b>3-54-95</b>	
4. HOME ADDRESS (Number, street or RFD, city or town, zone and State)			5. PURPOSE OF EXAMINATION <b>Annual</b>		6. DATE OF EXAMINATION <b>1-23-68</b>	
7. SEX <b>M</b>	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY _____ CIVILIAN _____		10. AGENCY		11. ORGANIZATION UNIT
12. DATE OF BIRTH <b>6/13/18</b>		13. PLACE OF BIRTH <b>N.Y.</b>		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN		
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS <b>NNMC</b>				16. OTHER INFORMATION		
17. RATING OR SPECIALTY				TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS

CLINICAL EVALUATION		
NOR- MAL	(Check each item in appropriate column; enter "NE" if not evaluated)	ABNOR- MAL
<input checked="" type="checkbox"/>	18. HEAD, FACE, NECK AND SCALP	
<input checked="" type="checkbox"/>	19. NOSE	
<input checked="" type="checkbox"/>	20. SINUSES	
<input checked="" type="checkbox"/>	21. MOUTH AND THROAT	
<input checked="" type="checkbox"/>	22. EARS—GENERAL (Int. & ext. canals) (Auditory acuity under items 70 and 71)	
<input checked="" type="checkbox"/>	23. DRUMS (Perforation)	
<input checked="" type="checkbox"/>	24. EYES—GENERAL (Visual acuity and refraction under items 59, 60 and 67)	
<input checked="" type="checkbox"/>	25. OPHTHALMOSCOPIC	
<input checked="" type="checkbox"/>	26. PUPILS (Equality and reaction)	
<input checked="" type="checkbox"/>	27. OCULAR MOTILITY (Associated parallel movements, nystagmus)	
<input checked="" type="checkbox"/>	28. LUNGS AND CHEST (Include breasts)	
<input checked="" type="checkbox"/>	29. HEART (Thrust, size, rhythm, sounds)	
<input checked="" type="checkbox"/>	30. VASCULAR SYSTEM (Varicosities, etc.)	
<input checked="" type="checkbox"/>	31. ABDOMEN AND VISCERA (Include hernia)	
<input checked="" type="checkbox"/>	32. ANUS AND RECTUM (Hemorrhoids, fistulae) (Prostate, if indicated)	
<input checked="" type="checkbox"/>	33. ENDOCRINE SYSTEM	
<input checked="" type="checkbox"/>	34. G-U SYSTEM	
<input checked="" type="checkbox"/>	35. UPPER EXTREMITIES (Strength, range of motion)	
<input checked="" type="checkbox"/>	36. FEET	
<input checked="" type="checkbox"/>	37. LOWER EXTREMITIES (Except feet) (Strength, range of motion)	
<input checked="" type="checkbox"/>	38. SPINE, OTHER MUSCULOSKELETAL	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	40. SKIN, LYMPHATICS	
<input checked="" type="checkbox"/>	41. NEUROLOGIC (Equilibrium tests under item 72)	
<input checked="" type="checkbox"/>	42. PSYCHIATRIC (Specify any personality deviation)	
<input checked="" type="checkbox"/>	43. PELVIC (Females only) (Check how done) <input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES. (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

RESULTS	
12.8	HGB GMS 100ML
40	HCT %
5.2	WBC X10 <sup>3</sup>
61	NEUT %
1	LYM %
28	EOS %
3	MONO %
1	PLATELET X10 <sup>3</sup>

CLOSURE

#38 slight discomfort in **(R)** suprascapular area.

#39

SEARCHED	NUMBERED
APR 9 1968	

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)		REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES <b>Exam Sept 68 Class 1 No defects noted</b>
O—Restorable teeth /—Nonrestorable teeth X—Missing teeth XXX—Replaced by dentures (G X's)—Fixed bridge, brackets to include abutments		
R I G H T	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17 X	L E F T

## LABORATORY FINDINGS

45. URINALYSIS: A. SPECIFIC GRAVITY <b>1.020</b>		46. CHEST X-RAY (Place, date, film number and result) Date of Report - <b>3-23-68</b> <b>6492 - No active chest disease</b>	
B. ALBUMIN <b>neg</b>	D. MICROSCOPIC <b>Eos. Neg</b>	50. OTHER TESTS <b>X-Ray Both Shoulders - See Report</b>	
C. SUGAR <b>neg</b>	48. EKG <b>NCS</b>	49. BLOOD TYPE AND RH FACTOR	
47. SEROLOGY (Specify test used and result) <b>neg</b>		2-10-67	

# MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT 67 1/2"	52. WEIGHT 161	53. COLOR HAIR Brown	54. COLOR EYES Blue	55. BUILD: (Check one)	SLENDER	MEDIUM	HEAVY	OBESE	56. TEMPERATURE
57. BLOOD PRESSURE (Arm at heart level)				58. PULSE (Arm at heart level)					
A. SITTING SYS. 110 DIAS. 70	B. RECUMBENT SYS. DIAS.	C. STANDING (3 min.) SYS. DIAS.	A. SITTING 84		B. AFTER EXERCISE		C. 2 MIN. AFTER	D. RECUMBENT	E. AFTER STANDING 3 MIN.
59. DISTANT VISION			60. REFRACTION			61. NEAR VISION			
RIGHT 20/ 40 CORR. TO 20/ 1.5			BY S. CX			25M CORR. TO BY			
LEFT 20/ 10 CORR. TO 20/ 1.5			BY S. CX			25M CORR. TO BY			
62. HETEROPHORIA (Specify distance)									
ES°		EX°		R. H.		L. H.		PRISM DIV.	
								PRISM CONV. CT	
63. ACCOMMODATION		64. COLOR VISION (Test used and result)				65. DEPTH PERCEPTION (Test used and score)		UNCORRECTED	
RIGHT LEFT		PIP-1916						CORRECTED	
66. FIELD OF VISION		67. NIGHT VISION (Test used and score)				68. RED LENS TEST		69. INTRAOCULAR TENSION	
70. HEARING		71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)	
RIGHT WV /15 SV /15		250 286 512 1024 2048 3000 3396 4096 6144 8192							
LEFT WV 15 /15 SV 15 /15		RIGHT							
		LEFT							
73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY									

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify) PA - (R) + (L) Suprascapular areas (x-rays)						76. A. PHYSICAL PROFILE					
						P	U	L	H	E	S
77. EXAMINEE (Check) A. <input checked="" type="checkbox"/> IS QUALIFIED FOR B. <input type="checkbox"/> IS NOT QUALIFIED FOR						B. PHYSICAL CATEGORY					
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER						A	B	C	E		
79. TYPED OR PRINTED NAME OF PHYSICIAN						SIGNATURE					
80. TYPED OR PRINTED NAME OF PHYSICIAN						SIGNATURE					
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)						SIGNATURE					
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY						SIGNATURE					
						NUMBER OF ATTACHED SHEETS					



PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME

REGISTER NO.

WARD NO.

MORRELL, Donald Clark  
6'7 1/2" 161

FBI

T-18

AGE

SEX

(Check one)

49

M

☐ BEDSIDE WHEELCHAIR,  
OR STRETCHER

☐ BED  
PATIENT

☐ AMBULATORY

EXAMINATION REQUESTED

PA-~~RA~~ Suprascapular areas

REQUESTED BY

DATE OF REQUEST

DR. D. E. CAMPBELL

1-23-68

(Above space for mechanical imprinting, if used)

PERTINENT CLINICAL HISTORY, OPERATIONS, PHYSICAL FINDINGS, AND PROVISIONAL DIAGNOSIS

Same discomfort (R) suprascapular area  
perhaps 2° to fall in Dec. 67.

FILM NO. 6492

DATE OF REPORT 25 Jan 68

RADIOGRAPHIC REPORT

Multiple projections of both scapula regions demonstrates the visuslized osseous structures to be normal in appearance.

F. MAHER  
CDR MC USN  
tec

SIGNATURE: (Specify location of laboratory if not part of requesting facility)

Standard Form 519A (Rev. Aug 1954)  
Promulgated by Bureau of the Budget  
Circular A-32 (Rev.)

RADIOGRAPHIC REPORT

519-205

(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)

67-421642-195

gaw

**Attachment to Standard Form 88, Report of Medical Examination  
For Information and Guidance of Medical Examiner**

Name of Examinee \_\_\_\_\_  
(Type or print)

*Marrell*  
Last

*Donald*  
First

*C.*  
Middle

The following portions of the attached examination report form need not be completed:

2	9	62	69
3	11	65	72
4	14	67	76
8	17	68	

46. Is necessary unless facilities for affording same are not readily available.

48. Not required unless examinee is over 35 years of age or examination indicates such is desirable.

49. Is necessary unless facilities for affording same are not readily available.

71. Audiometer examinations should be afforded whenever possible for all Special Agent applicants and Special Agents. Applicants for the Special Agent position will not be accepted if the hearing loss exceeds a 15 decibel average in either ear in the conversational speech range (500, 1000, 2000 cycles).

**For All Examinees, Whether Clerical or Special Agent Applicants or Employees:**

The medical examiner should answer the following question:

Examinee ☒ is ☐ is not qualified for strenuous physical exertion.

**To be Answered in the Case of All Male Employees and Male Applicants:**

1. Does examinee have any defects restricting or prohibiting his participation in defensive tactics and dangerous assignments which might entail the practical use of firearms?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

2. Does examinee have any defects prohibiting safe operation of motor vehicles?

☒ No ☐ Yes If "yes" please specify defects. \_\_\_\_\_

3. For safe driving of motor vehicles, Civil Service Commission requires distant vision must test at least 20/40 in one eye and 20/100 in the other, corrected or uncorrected. Should examinee wear corrective glasses while operating a motor vehicle? ☒ Yes ☐ No  
If recommendation is based on a factor other than above standard, indicate basis \_\_\_\_\_

*67-111045-195*

### Desirable Weight Ranges for Males

Height	Small Frame	Medium Frame	Large Frame
5'4"	117 - 125	123 - 135	131 - 148
5'5"	120 - 129	126 - 139	134 - 152
5'6"	124 - 133	130 - 143	138 - 157
5'7"	128 - 137	134 - 148	143 - 162
5'8"	132 - 141	138 - 152	147 - 166
5'9"	136 - 146	142 - 156	151 - 170
5'10"	140 - 150	146 - 161	155 - 175
5'11"	144 - 154	150 - 166	160 - 180
6'	148 - 158	154 - 171	164 - 185
6'1"	152 - 163	158 - 176	169 - 190
6'2"	156 - 167	163 - 181	174 - 195
6'3"	160 - 171	168 - 186	178 - 200
6'4"	169 - 180	178 - 196	188 - 210
6'5"	174 - 185	182 - 202	192 - 216

4. Examinee's frame is ☐ small ☐ medium ☒ large

5. Considering above weight table, the examinee's frame, and other individual physical characteristics, I consider his present weight ☒ Satisfactory ☐ Excessive ☐ Deficient

6. Under proper medical supervision, employee should ☐ lose \_\_\_\_\_ pounds

☐ gain \_\_\_\_\_ pounds

Remarks: \_\_\_\_\_

Signature of Medical Examiner

Date

Mr. DeLoach

5/27/68

T. E. Bishop

**PERSONNEL CHANGES  
CORRESPONDENCE AND TOURS SECTION  
CRIME RECORDS DIVISION**

Donald C. Morrell, Section Chief of the Correspondence and Tours Section of the Crime Records Division, has submitted his application for retirement effective the close of business on 6/24/68. This will require that a replacement be designated for Mr. Morrell as Section Chief.

It is recommended that SA Gordon E. Malmfeldt, who is presently No. 1 Man in the Correspondence and Tours Section, be designated as Section Chief to replace Morrell. Malmfeldt entered on duty as an Agent on 2/19/51 and, after assignment to the New Haven and Washington Field Offices, was transferred to the Bureau on 9/14/53. He served in the Crime Research Section of the

Division until 10/30/61, when he was transferred to the Correspondence and Tours Section of the Crime Records Division as No. 1 Man of that section. He has served continuously in that capacity to the present. Mr. Malmfeldt has demonstrated initiative, good judgment and industry while serving as No. 1 Man and while filling in during absences of the Section Chief. He is completely familiar with all matters handled by the Correspondence and Tours Section and it is felt that he is completely capable of taking over as Section Chief. He is within desirable weight limits for his height and frame. He has been in GS-15 since 1/29/67.

Should the designation of Mr. Malmfeldt as Section Chief be approved, it is recommended that SA P. Dennis Williams, who is presently Chief of the Special Correspondence Unit of the Correspondence and Tours Section, be designated as No. 1 Man of the section to replace Malmfeldt.

- 1 - Mr. DeLoach
- 1 - Mr. Mohr
- 1 - Mr. Callahan
- 1 - Personnel File of SA Malmfeldt
- ① - Personnel File of SA Morrell
- 1 - Personnel File of SA Williams

TER:mis

(8)

CONTINUED - OVER

Bishop to DeLoach memo  
RE: PERSONNEL CHANGES  
CORRESPONDENCE AND TOURS SECTION  
CRIME RECORDS DIVISION

SA Williams entered on duty in the Bureau as a clerk on 1/10/42 and was designated a Special Agent on 4/5/43. He served in the San Diego and San Francisco Offices until 9/11/44, when he entered on military duty, from which he returned on 9/3/46. He then served in the San Francisco, Chicago and Charlotte Offices prior to being assigned to the Investigative Division at Seat of Government on 2/22/60. He served as a supervisor in the Accounting and Fraud Section until he was transferred to the Inspection Division on 7/22/63. He performed duties as a permanent aide until 8/10/64, when he was assigned to the Correspondence and Tours Section of the Crime Records Division. He has served as Unit Chief of the Special Correspondence Unit of that section since 4/19/65. He has demonstrated complete familiarity with all aspects of the work of the Correspondence and Tours Section, makes a substantial personal appearance, is industrious, intelligent, and operates well on his own initiative. He was promoted to GS-15 effective 6/2/68. SA Williams is within the desirable weight limits for his height and frame.

RECOMMENDATIONS:

1. That Special Agent Gordon E. Malmfeldt be designated as Section Chief of the Correspondence and Tours Section of the Crime Records Division at no change in grade or salary.

2. That Special Agent P. Dennis Williams be designated as No. 1 Man of the Correspondence and Tours Section of the Crime Records Division at no change in grade or salary.

## RETIREMENT INFORMATION

Name: **Mr. Donald C. Morrell**Date: **5-29-68**

## APPLICATION

- ☐ The "Application for Retirement" will be forwarded by the Bureau to the Civil Service Commission (CSC) for approval.
- ☒ The enclosed "Application for Retirement" should be executed (or changed as indicated below) and promptly returned to the Bureau for forwarding to the Civil Service Commission (CSC) for approval. The information sheet attached to the application is for your records and you should detach it before sending in the application.

## DEPOSIT OR REDEPOSIT

Making either a deposit or redeposit is optional. Such amounts are paid directly by you to CSC; therefore, it is possible that you have already made the deposit or redeposit indicated below without the Bureau's knowledge, having dealt directly with CSC. If so, you may ignore this matter now. If not, after a review of the approximate annuity figures shown below, should you decide to make a deposit or redeposit, you should request Bureau to forward Standard Form 2803 to you. This form should be returned to the Bureau.

- ☒ Not applicable.
- ☐ The deposit you may owe is a payment to the retirement fund to cover a period of service during which no retirement deductions were withheld from salary. Credit is given for service not covered by deductions; however, if the deposit is not paid, your annuity will be reduced each year by 10% of the amount due as deposit. The amount you may owe is approximately \$ \_\_\_\_\_.
- ☐ The redeposit you may owe is a payment to the retirement fund to cover a period of service for which retirement deductions were withheld from your salary but later refunded to you following your separation from civilian employment. No credit is allowed in the computation of annuity for the period of service covered by the refund unless redeposit is made. The amount you may owe is approximately \$ \_\_\_\_\_.

## ANNUITY

Annuities are computed on full months of service. The estimated annuity below is based on your ☒ Bureau service, ☐ other civilian Government service and/or ☒ military service known to us, totalling 24 years, 10 months and 0 days. CSC makes the official computations and determines whether prior service is creditable, advising you direct the exact amount of your annuity. The figures below are only estimates, and they do not take account of deduction for health insurance coverage. You should receive the first annuity check about 2 months after separating from the Bureau's rolls.

## TYPES OF ANNUITY

## Married applicants only

	With Deposit	Without Deposit	With Redeposit	Without Redeposit	With Deposit & Redeposit
<input checked="" type="checkbox"/> Reduced Type of Annuity with benefit to Widow or Widower	\$ <u>738</u>	\$ _____	\$ _____	\$ _____	\$ _____
<input checked="" type="checkbox"/> Annuity Without Survivor Benefit	\$ <u>795</u>	\$ _____	\$ _____	\$ _____	\$ _____

Unmarried applicants only  
(Including Widowed or Divorced)

<input type="checkbox"/> Annuity without Survivor Benefit	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Reduced Annuity with Benefit to Person having an Insurable Interest	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Survivor Annuity (55% of all or whatever portion of your earned annuity you specify) plus annuity for each eligible child.	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

## SEPARATION FROM ROLLS

Since you ☒ will cease active duty ☐ ceased active duty on 6-24-68 your annuity will commence 7-4-68 immediately following the ☐ cease active duty date or ☒ expiration of current accrued annual leave on 7-3-68 earned through 6-28-68. Item B4 on application ☐ changed to ☒ should be changed to close of business 7-3-68. If annual leave was or will be used by you subsequent to \_\_\_\_\_, this date will change and the Bureau should be immediately advised.

- ☐ If retirement is for disability, separation takes effect after the approval of CSC is received by the Bureau or after the expiration of accrued sick leave, whichever occurs later. Under Internal Revenue Service regulations, some sick pay and disability income is not taxable; thus, you may be able to exclude from Federal income tax liability all or a part of the payments you receive for sick leave used and for annuity received as a disability annuitant. Any such exemption would terminate when you reach normal retirement age. Questions you may have as an annuitant regarding your income tax liability or privileges can be answered by the Internal Revenue Service.

- ☒ You will receive a lump-sum payment for your accumulated annual leave in the approximate amount of \$ 3825. A deduction for Federal income tax has been made from this estimate.

3/10/68

7-421042-196

**FEDERAL EMPLOYEES' GROUP LIFE INSURANCE**

- ☐ Records show you elected Optional Insurance of \$10,000 and have Regular Insurance of \$ \_\_\_\_\_.
- ☒ Records show you declined Optional Insurance but are covered by Regular Insurance of \$ 20,000.
- ☐ Records show you waived both Regular and Optional Insurance.

You may continue your group life insurance coverage following retirement or convert such insurance to an individual life insurance policy without being required to undergo a physical examination. Conversion to an individual life insurance policy necessitates paying the usual premium for a person of your age and class of risk. If you decide to convert, the Bureau should be immediately advised. Otherwise, SF-56, "Agency Certification of Insurance Status," will be forwarded to CSC and a copy sent to you. If you elect to continue Regular Insurance coverage, such protection will continue premium free until you reach age 65. At that time coverage will be reduced 75% (at 2% per month) by the time you reach age 68 years and 2 months. The remaining 25% is also premium free for the remainder of life. Optional Insurance of \$10,000, if continued after retirement, will be at full premium cost until you reach age 65. Thereafter, it is cost free for the remainder of life and commencing at age 65 it will be reduced 75% at the same rate as Regular Insurance. The premium cost for Optional Insurance for all employees up to age 34 is \$78 per year, from age 35 through 54 it is \$156 per year, and from age 55 to age 65, the cost increases to \$520 per year. Optional Insurance coverage may be waived at any time by notifying CSC and you may still keep your Regular Insurance. Following retirement, double indemnity benefits concerning accidental death and dismemberment no longer exist for either Regular and Optional Insurance.

**DESIGNATION OF BENEFICIARY, STANDARD FORM 54, FEDERAL EMPLOYEES' GROUP LIFE INSURANCE**

Designation filed:

- ☒ No, but not necessary as beneficiary will be in order of precedence used by United States Government, i.e., (1) widow or widower, (2) children, (3) parents, etc.
- ☐ Yes; beneficiary designated as \_\_\_\_\_.
- This designation is being forwarded to CSC and it will remain valid unless changed or canceled. Contact CSC for any change desired following retirement.

**FEDERAL EMPLOYEES HEALTH BENEFITS ACT OF 1959**

- ☐ Records show you elected not to enroll.
- ☒ Records show you enrolled in the following plan:
- ☐ Government-wide Service Benefit Plan (Blue Cross - Blue Shield)
  - ☐ Government-wide Indemnity Benefit Plan (Aetna Life Insurance Company)
  - ☐ Comprehensive Medical Plan
  - ☒ Special Agents Mutual Benefit Association (SAMBA)

**Note:** The life insurance you have under this plan will continue in force for 6 months following your last semi-annual premium payment. If you desire to continue the protection beyond this time, you may do so without a physical examination. You may elect to continue up to age 70 at group rates a specific amount of your SAMBA Life Insurance. If you presently carry \$3,000 of life insurance with SAMBA, you may continue \$1,000 after you retire at a cost of \$2.25 semiannually. If you presently carry \$7,000 to \$11,000, you may continue \$3,000 at a cost of \$11.25 semiannually. If you presently carry \$11,000 or over, you may continue \$6,000 at a cost of \$27.45 semiannually. The life insurance that cannot be continued with SAMBA can be converted to a regular policy with Prudential. At age 70 you may convert the amount of life insurance carried with SAMBA to a regular policy with Prudential.

Your desire in respect to your SAMBA life insurance at retirement should be communicated in writing to SAMBA 1720 Massachusetts Avenue, Northwest, Washington, D. C. 20036. If you have Dependents Group Life Insurance, this will continue until the next semiannual premium is due (1-10 or 7-10), with a 31-day grace period. You may convert the insurance on your spouse to an individual policy with The Prudential Insurance Company of America without a medical examination. The premium will be the same as if your spouse applied for an individual policy at that time. You may make the necessary conversion arrangements through the nearest Prudential Office.

Unless you cancel your present enrollment, you will remain under your health benefits plan after retirement, and your enrollment will be transferred to CSC. The cost of your share of the plan will be deducted from your annuity by CSC.

Enrollment of an employee who dies while he is enrolled "for self and family" continues for his family if at least one family member is entitled to an annuity as the survivor. If the survivor annuitant is the only eligible family member, the retirement system will automatically change the enrollment to "self."

The original of Standard Form 2810, "Notice of Change in Enrollment Status," will be forwarded to you by the Bureau at a later date.

**SPECIAL ACCIDENT AND TRAVEL INSURANCE (SATI)**

If you are a member of SATI, after your retirement you may continue but not increase coverage up to a maximum of \$25,000 at the rate of \$2.25 per thousand. If you have coverage on your wife and children, it will continue only until the next premium is due, and cannot be renewed. Further information on SATI can be secured by writing Wright and Co., 1001 Connecticut Avenue, Northwest, Washington, D. C. 20036.

**ENCLOSURES**

- ☒ Standard Form 2801, "Application for Retirement"
- ☒ Standard Form 8, "Notice to Federal Employee About Unemployment Compensation"
- ☒ Pamphlet, "Your Retirement System."
- ☐ Standard Form 2801-B, "Physician's Statement," for disability retirement.

Mr. Tolson	_____
Mr. DeLoach	_____
Mr. Mohr	✓
Mr. Bishop	_____
Mr. Casper	_____
Mr. Callahan	✓
Mr. Conrad	_____
Mr. Felt	_____
Mr. Gale	_____
Mr. Rosen	_____
Mr. Sullivan	_____
Mr. Tavel	_____
Mr. Trotter	_____
Tele. Room	12/16
Miss Holmes	_____
Miss Gandy	_____

May 24, 1968

Honorable John Edgar Hoover  
Federal Bureau of Investigation  
Washington, D. C.

Dear Mr. Hoover:

I would like at this time to submit my request for retirement with active duty to cease at the close of business on June 21, 1968.

*24 Mr Morrell use 5/28*

This is a most difficult thing to do because for almost 21 years the Bureau has been my life; however, the time has come when I want to be in a position to devote a little more time to my family.

One cannot leave the FBI without taking a part of it with him -- or leaving a bit of himself behind -- so I ask that if at any time, in any manner, I can be of assistance to you and the Bureau, please let me know as I want always to be of help.

I would greatly appreciate receiving the "Investigator" as well as other material disseminated by the FBI from time to time. My forwarding address will be Post Office Box 721, Ocean Drive Beach, South Carolina 29582.

May I take this occasion to thank you for the privilege of being associated with you and the FBI for these many years and to wish you and its wonderful people only the best in all your endeavors in the years to come.

Sincerely yours,

*Donald C. Morrell*

Donald C. Morrell

EX-110  
MAY 24 1968 39

*copy let sent 5/29/68 wec/hlb*

REC-148

1121042-196

Searched	Numbered
4 MAY 27 1968	

72

*TELETYPE*  
*hlb*

*Copy made for Tele. Rm. 5-2468-EC.*



June 5, 1968

b6  
b7C

Honorable Andrew E. Ruddock  
Director  
Bureau of Retirement and Insurance  
Civil Service Commission  
Washington, D. C. 20415

Dear Mr. Ruddock:

Enclosed is an Application for Retirement executed by Donald C. Morrell, a Special Agent of this Bureau, who has indicated that he desires to retire July 3, 1968. A copy of his Form 2806 is also enclosed.

During his service with this Bureau, Mr. Morrell has participated in the investigation of violations of laws of the United States and has performed duties of a hazardous nature. His services have been entirely satisfactory and he will have met the age and service requirements necessary to retire under the provisions of Section 6(c) of the Civil Service Retirement Act, as amended.

In accordance with the action of the Attorney General delegating authority to me to make appropriate recommendations in connection with applications for retirement from employees of the Federal Bureau of Investigation, I hereby recommend that Mr. Morrell's retirement be approved.

Sincerely yours,

John Edgar Hoover  
Director

Enclosures (2)

GB: lkt  
(8)

1 - [redacted] 4746  
1 - [redacted] 4513  
1 - [redacted] 6221 IB

1 - [redacted] 4264  
1 - Movement, 5524

NOTE: Active duty to cease 6/24/68; retirement effective 7/3/68.

MAIL ROOM ☐ TELETYPE UNIT ☐

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Bishop \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

*Delivered by J.E.H. 6-6-68*

76  
May 29, 1968

PERSONAL

0  
Mr. Donald C. Morrell  
Federal Bureau of Investigation  
Washington, D. C.

Dear Morrell:

I have your letter of May 24, 1968, concerning retirement, and I am certainly sorry that you are leaving.

Your contribution to our organization throughout many years of talented and energetic service has been momentous. I am most grateful for your effective efforts in the Bureau's behalf.

Thank you also for the kind comments and offer of future assistance. It will be a pleasure to place your name on the mailing list for Bureau publications, including "The Investigator."

With all good wishes to Mrs. Morrell and you,

WEC:klb  
(8) Sincerely,  
J. Edgar Hoover

- 1 - [redacted]  
1 - Voucher-Statistical Section (Sent Direct)  
1 - [redacted] (Last physical on 1-23-68)  
1 - [redacted] - SA Morrell's cease active duty date is 6-24-68. Place on Special Correspondents' List and "The Investigator" List. Forwarding address: Post Office Box 721, Ocean Drive Beach, South Carolina 29582.  
1 - Mr. Bishop (Personal Attention)(Enclosure) There is attached a copy of Form 3-496 for your information. SA Morrell will be interviewed in the Personnel Section and provided with pertinent retirement information.

NOTE: SA Morrell will be qualified by age and service for retirement under liberalized provisions of the Civil Service Retirement Act. He is assigned as an Agent in the Crime Records Division in GS-16, \$23,079 per annum. Salutation per Reading Room.

MAIL ROOM ☐ TELETYPE UNIT ☐

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Bishop \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

MAILED 6

MAY 31 1968

COMM-FBI

b6  
b7C

RECEIPT FOR GOVERNMENT PROPERTY  
FEDERAL BUREAU OF INVESTIGATION  
UNITED STATES DEPARTMENT OF JUSTICE

Date 6-24-68

I certify that I have ☐ received ☒ returned the following Government property for official use:

*to Mulmfeelt* {  
✓ Badge with case #4028  
✓ Commission Card with case #4397  
✓ Manual of Rules and Regulations #594  
✓ Manual of Instructions Vol. 1,11.111.1V #8065  
✓ Agent Brief Case  
✓ Official Police Revolver SN 658244  
✓ Holster and Pachmayr Adapter  
✓ FBI Handbbok #4218  
✓ Supervisors' Manual #366  
✓ Field Inspectors Manual #609  
*to Mulmfeelt* {  
✓ FBI Identification Card #S-08082  
✓ Time & Attendance Manual #311  
✓ SOG Inspectors Manual #272  
*to Mulmfeelt,* {  
✓ Key to Room B-634  
✓ Key to locks on window grating in B-634  
✓ Position Classification Manual #64  
✓ Key to Room 4728  
✓ Key to Room 4718  
✓ Key to upper portion of door B-634  
✓ GTR'S 3923073 - 080  
✓ FBIRA Card

*Property lent (✓)  
recd & kept  
as noted  
6-24-68  
pe*

*3/pe*

READ

The Government property which you hereby acknowledge is charged to you and you are responsible for taking care of it and returning it when its use has been completed.

DO NOT MARK OR WRITE ON IT OR MUTILATE IT IN ANY WAY

Very truly yours,

(Signature)

*Donald C. Morrell*

(Typed name)

Donald C. Morrell



UNITED STATES DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION

In Reply, Please Refer to  
File No.

Director  
Federal Bureau of Investigation  
United States Department of Justice  
Washington, D. C. 20535

Dear Sir:

For inclusion in the fund to be paid to the designated beneficiary of any Special Agent of the FBI who has previously contributed to this fund and who dies from any cause except self-destruction while employed as a Special Agent, I am forwarding herewith (by Check - Money Order) the sum of \$20, payable to S.A.I.F., to be included in said fund. Payment will be made for death by self-destruction after the Agent has been a member of the fund for a continuous period of two years. It is understood and agreed that the sum tendered herewith is a voluntary, gratuitous contribution to said fund which I understand is to be administered in the following manner.

The Director of the FBI will appoint a committee which shall consider all matters pertaining to the acquisition, safe keeping and expending of said fund, which committee will recommend appropriate action to the Director in pertinent matters. The Assistant Director of the Administrative Division of the FBI shall receive all contributions and account for same to the Director. Upon the death of any Special Agent who is a member of said fund the appointed committee will consider the case and submit a recommendation to the Director as to its conclusions. Appropriate instructions will then be issued to the Assistant Director of the Administrative Division, directing him to pay to the designated beneficiary the sum of \$20,000. The liability of the fund shall not under any circumstances exceed the amount of monies in the fund at the time any liability shall occur.

**EXECUTE IN DUPLICATE AND SUBMIT BOTH COPIES TO THE BUREAU**

Official Bureau Name (please type or print)	Date	Office of Assignment (or SOG Division)
SA Donald C. Morrell	5-27-68	Crime Records

The following person is designated as my beneficiary for Special Agents Insurance Fund:

Name (primary beneficiary; use given first name if female) Elizabeth H. Morrell	Relationship Wife
--	----------------------

Address  
5516 Charlcote Road, Bethesda, Maryland 20034

Name (contingent beneficiary, if desired; use given first name if female)	Relationship
	Daughter and Son

Address

Do you desire to designate the above-listed beneficiaries as the beneficiary and contingent beneficiary respectively of the Chas. S. Ross Fund as well? ☒ Yes ☐ No If not, the entire following portion must be executed.

The following person is designated as my beneficiary under the Chas. S. Ross Fund providing \$1500 death benefit to beneficiary of agents killed in the line of duty, other than travel accidents.

Name (primary beneficiary; use given first name if female)	Relationship

Address

Name (contingent beneficiary, if desired; use given first name if female)	Relationship

Address

Very truly yours,

Special Agent in Charge

Special Agent

Donald C. Morrell  
Special Agent

b6  
b7c

1441

UNITED STATES GOVERNMENT

# Memorandum

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Bishop \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

TO : Mr. Callahan

DATE: 5-23-68

FROM : J. B. Adams *JBA*

SUBJECT: SA DONALD C. MORRELL  
Section Chief - Correspondence and Tours Section  
Crime Records Division  
Veteran  
EOD 8-18-47; GS-16, \$23,079

The following is a brief summary of SA Morrell's record for the Director's use.

He entered on duty 8-18-47 as a Special Agent and served in the Charlotte, Atlanta and Washington Field Offices prior to his transfer to the Seat of Government on 3-16-53. He served in the Administrative Division until 3-14-60, when he was transferred to the Crime Records Division, where he is presently serving as Section Chief of the Correspondence and Tours Section. He is in Grade GS-16, \$23,079 per annum, having been promoted to Grade GS-16 on 10-11-67. He is 49 years of age, married and has 2 children.

He has not been subject to administrative action more severe than Censure and was last CENSURED on 5-11-66 inasmuch as he prepared an outgoing communication dated 5-2-66 which had to be returned since it contained inaccurate information. He was last COMMENDED on 1-9-67, for the excellent job he did during the past year as Vice-President of the FBI Recreation Association, and on 5-7-67 he received a QUALITY WITHIN-GRADE INCREASE for the exceptional manner in which he discharged his responsibilities during the past year.

The Director last saw him on 11-16-64, along with his wife and mother commemorating his admittance to practice in the U. S. Supreme Court this same date.

On 3-31-68 he was rated EXCELLENT with comments stating he had served as Section Chief of the Correspondence and Tours Section. He had distinguished himself in this capacity for his executive ability, administrative proficiency and personal leadership in handling the heavy volume of work and responsibilities in the Section. He was most competent and the outstanding results achieved in the Section could be attributed to his foresight and loyal support from his associates. He had also represented the Bureau in the Special Agents Mutual Benefit Association and in this role had been responsible for achieving benefits for Bureau personnel. He was interested in, available for, and had excellent qualifications for administrative advancement.

*JBA*  
FDH:ejc (2)  
Enclosure - Permanent Brief

*4210-12-198*  
*memo Mr. Tolson*  
*6/26/68*  
*J. Callahan*

He is presently serving in his only office of preference, Seat of Government and his overtime is satisfactory.

On 8-18-67 he received his TWENTY-YEAR SERVICE AWARD KEY. By letter dated 3-29-68 he requested an autographed color photograph of the Director, which was sent 4-2-68.

His Son, [REDACTED], was formerly employed with the Bureau as a Clerk in the Washington Field Office. He entered on duty 6-27-60; resigned 9-2-60; reinstated 6-26-61 and resigned 9-1-61. His services were satisfactory.

*man*

b6  
b7C

June 26, 1968

MEMORANDUM FOR MR. TOLSON

On June 7, 1968, I saw Special Agent Donald C. Morrell, Section Chief of the Correspondence and Tours Section of the Crime Records Division, who is retiring this month. Mr. Morrell expressed his appreciation for the opportunity of having worked in the Bureau and offered to be of any service he could to the Bureau in the future.

Very truly yours,

**J. E. H.**

John Edgar Hoover  
Director

JEH:EDM (4)  
*edm*

SENT FROM D. O.	
TIME	3:40 PM
DATE	6-26-68
BY	<i>[Signature]</i>

61-1617-199	
SEARCHED	INDEXED
JUN 27 1968	

*[Signature]*

Tolson \_\_\_\_\_  
DeLoach \_\_\_\_\_  
Mohr \_\_\_\_\_  
Bishop \_\_\_\_\_  
Casper \_\_\_\_\_  
Callahan \_\_\_\_\_  
Conrad \_\_\_\_\_  
Felt \_\_\_\_\_  
Gale \_\_\_\_\_  
Rosen \_\_\_\_\_  
Sullivan \_\_\_\_\_  
Tavel \_\_\_\_\_  
Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Holmes \_\_\_\_\_  
Gandy \_\_\_\_\_

JUL 1 1968

MAIL ROOM ☐ TELETYPE UNIT ☐

*[Handwritten signature]*

#100-03-8019

LAST NAME	FIRST NAME	MIDDLE NAME	DATE OF BIRTH			SOC. SEC. NO.			AGENCY	PAYROLL OFFICE	LOCATION	PAYROLL OFFICE NO.
			MO.	DAY	YR.							
MORRELL	DONALD	C.	6	13	18	100	03	8019	JUSTICE	FBI	WASHINGTON	15-02-0001
			DO NOT USE									
2. _____												
3. _____												
4. _____												
(RECORD EACH NAME CHANGE-- STRIKE OUT PREVIOUS NAME)												

SERVICE HISTORY					FISCAL RECORD			
EFFECTIVE DATE	ACTION	BASE PAY	DO NOT USE	REMARKS	YEAR	CALENDAR YEAR SALARY DEDUCTIONS	ACCUMULATIVE TOTAL SALARY DEDUCTIONS	REMARKS
(1)	(2)	(3)		(4)	(5)	(6)	(7)	(8)
BSI (PL 87-793) approved 10/11/62 Effective 10/11/62		15,045			1961	Bal. year	7577.83	
12/9/62	SSI	15,525		GS 15	1962	928.90	8498.73	
12/8/63	SSI	16,005		GS 15	1963	1009.84	9508.57	
BSI (PL 87-793) approved 10/11/62 Effective 1/5/64		17,210			1964	1185.26	10693.83	
BSI (PL 88-426) approved 8/14/64 Effective 7/5/64		18,170			1965	1191.21	11885.04	
BSI (PL 89-301) approved 10/29/65 Effective 10/10/65		18,825			1966	1278.32	13163.36	
12/5/65	WGI	19,115		GS 15	1967	1353.26	14516.62	
BSI (PL 89-504) approved 7/18/66 Effective 7/3/66		19,978			1968	826.02	15342.64	
5/7/67	QUALITY INCREASE	20,585						
10/11/67	PROMOTION	22,085		GS 16				
BSI (PL 90-206) approved 12/16/67 Effective 10/8/67		23,079						
10/8 thru 10/11/67 paid		21,469						
cb 7-3-68 Retirement ( 20 Years Investigative Experience								
Pay ceased 7-3-68 Annuity to commence 7-4-68.								

Deductions and Service Certified Correct

Certifying Officer, Federal Bureau of Investigation

Not indebted on account of unearned leave.

67-NO. 1 ORD  
2 JUL 31 1968

Employee Covered By Health Benefits Act of 1959

Enrollment Code No. 442

Carrier Control No. 3211097

BKI 47-62, SF 576

2809 L 2910 7-30-68



08082

MORRELL Donald C.

(SURNAME)	(FIRST NAME)	(SECOND NAME)
ALVAREZ	JOSE	ANTONIO
BROWN	MARY	ELIZABETH
CHEN	DAVID	WILLIAM
DELA CRUZ	JOHN	DAVID
GARCIA	JOSE	ANTONIO
HARRIS	JOHN	DAVID
LOPEZ	JOSE	ANTONIO
MARTINEZ	JOSE	ANTONIO
MILLER	JOHN	DAVID
MOORE	JOHN	DAVID
PEREZ	JOSE	ANTONIO
RODRIGUEZ	JOSE	ANTONIO
SMITH	JOHN	DAVID
WANG	DAVID	WILLIAM
WILSON	JOHN	DAVID
YOUNG	JOHN	DAVID

~~Grade and salary fixed by Classification Act of 1949 (P.L. 429, approved 10-28-49)~~



**APPLICATION FOR RETIREMENT**  
**CIVIL SERVICE RETIREMENT SYSTEM**  
(USE ONLY IF SEPARATED ON OR AFTER OCTOBER 11, 1962)

6 GAO 5000  
2801-106

To avoid delay—1. Read information carefully; 2. Complete application in full; 3. Typewrite or print in ink

**A. PERSONAL INFORMATION**

1. NAME MR MRS MISS <u>MORRELL</u> <u>DONALD</u> <u>CLARK</u> (Last) (First) (Middle)			2. DATE OF BIRTH (Month) (Day) (Year) <u>JUNE 13 1918</u>	3. SOCIAL SECURITY NUMBER <u>100-03-8019</u>
4. ADDRESS (Number and street) (City and State) (Zip Code) <u>P.O. Box 721, OCEAN DRIVE BEACH,</u> <u>SOUTH CAROLINA 29582</u>			5. LIST ALL OTHER NAMES YOU HAVE USED	
7. (A) ARE YOU MARRIED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			6. (B) IF "NO," OF WHAT COUNTRY ARE YOU A CITIZEN?	
7. (B) IF "YES," GIVE THE FOLLOWING INFORMATION:				
WIFE'S OR HUSBAND'S NAME (First) (Middle) <u>ELIZABETH Hammer</u>		HER (OR HIS) BIRTH DATE (Month) (Day) (Year) <u>OCT. 3 1918</u>	DATE OF MARRIAGE (Month) (Day) (Year) <u>AUG 20, 1942</u>	PLACE OF MARRIAGE (City and State) <u>ISLIP, NEW YORK</u>
MARRIAGE PERFORMED BY <input checked="" type="checkbox"/> CLERGYMAN OR JUSTICE OF THE PEACE <input type="checkbox"/> OTHER (Specify)				

**B. CIVILIAN SERVICE**

1. DEPARTMENT OR AGENCY IN WHICH PRESENTLY OR LAST EMPLOYED, INCLUDING BUREAU OR DIVISION <u>FBI - JUSTICE</u>		2. LOCATION OF EMPLOYMENT (City and State) <u>WASHINGTON, D.C.</u>	
3. TITLE OF LAST POSITION <u>SPECIAL AGENT</u>	4. DATE OF FINAL SEPARATION (Month) (Day) (Year) <u>7-3-68</u>	5. APPROXIMATE NUMBER OF YEARS OF CIVILIAN SERVICE <u>21</u>	
6. DO YOU HAVE FEDERAL EMPLOYEES GROUP LIFE INSURANCE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		7. ARE YOU ENROLLED IN A PLAN UNDER THE FEDERAL EMPLOYEES HEALTH BENEFITS PROGRAM? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

**C. MILITARY SERVICE**

1. COMPLETE THE SCHEDULE BELOW IF YOU HAVE PERFORMED ACTIVE DUTY THAT TERMINATED UNDER HONORABLE CONDITIONS IN ANY OF THE FOLLOWING SERVICES: (A) ARMY, NAVY, MARINE CORPS, AIR FORCE, OR COAST GUARD OF THE UNITED STATES; OR (B) REGULAR CORPS OR RESERVE CORPS OF THE PUBLIC HEALTH SERVICE AFTER JUNE 30, 1960; OR (C) AS A COMMISSIONED OFFICER OF THE COAST AND GEODETIC SURVEY AFTER JUNE 30, 1961. IF AVAILABLE, ATTACH A COPY OF YOUR DISCHARGE CERTIFICATE.

BRANCH OF SERVICE	SERIAL NUMBER	DATE OF ENTRANCE ON ACTIVE DUTY	DATE OF SEPARATION FROM ACTIVE DUTY	LAST GRADE OR RANK	ORGANIZATION AT DISCHARGE (Div., Regt., Co., etc.)
<u>US NAVAL RESERVE</u>	<u>1198381</u>	<u>1-22-42</u>	<u>1-5-46</u>	<u>LT. CMDR.</u>	<u>USS PC-1138</u>

2. (A) ARE YOU A MILITARY RE-SERVIST (EITHER ACTIVE OR INACTIVE)? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	2. (B) ARE YOU IN RECEIPT OF OR HAVE YOU EVER APPLIED FOR MILITARY RETIRED PAY? (RETIRED PAY DOES NOT INCLUDE V.A. PENSION OR COMPENSATION.) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	2. (C) IF "YES," WERE YOU RETIRED FROM A RESERVE COMPONENT UNDER CHAPTER 67, TITLE 10, U.S.C. (FORMERLY TITLE III, PUBLIC LAW 80-810)? <input type="checkbox"/> YES <input type="checkbox"/> NO
--	---	--

**D. DISABILITY INFORMATION**

Only applicants for total disability retirement will complete Part D.	1. WHEN DID YOU BECOME TOTALLY DISABLED? (Month, year)
	2. BRIEFLY DESCRIBE YOUR DISABILITIES. STATE WHEN INCURRED, AND HOW THEY INTERFERE WITH PERFORMANCE OF THE DUTIES OF YOUR POSITION. (ATTACH ADDITIONAL COMMENTS ON PLAIN SHEET OF PAPER IF NECESSARY)

**E. OTHER CLAIM INFORMATION**

1. (A) HAVE YOU EVER RECEIVED OR MADE APPLICATION FOR COMPENSATION UNDER THE FEDERAL EMPLOYEES' COMPENSATION ACT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		1. (B) IF "YES," STATE THE NUMBER OF YOUR COMPENSATION CLAIM AND THE PERIOD FOR WHICH YOU RECEIVED COMPENSATION	
		CLAIM NUMBER	FROM (Month) (Day) (Year) TO (Month) (Day) (Year)
2. (A) HAVE YOU PREVIOUSLY FILED ANY APPLICATION UNDER THE CIVIL SERVICE RETIREMENT SYSTEM, INCLUDING APPLICATION FOR RETIREMENT, REFUND, DEPOSIT OR REDEPOSIT, OR VOLUNTARY CONTRIBUTIONS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		2. (B) IF "YES," INDICATE THE TYPE(S) OF APPLICATION AND GIVE THE CLAIM NUMBER(S) IF KNOWN	
		<input type="checkbox"/> RETIREMENT <input type="checkbox"/> DEPOSIT OR REDEPOSIT <input type="checkbox"/> REFUND <input type="checkbox"/> VOLUNTARY CONTRIBUTIONS	CLAIM NUMBER(S)
3. (A) DO YOU HAVE LIFE INSURANCE THROUGH A FORMER EMPLOYEE BENEFICIAL ASSOCIATION FOR WHICH YOU NOW PAY PREMIUMS TO THE CIVIL SERVICE COMMISSION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		3. (B) IF "YES," GIVE YOUR ACCOUNT NO. <u>B</u>	
4. (A) HAVE YOU EVER BEEN EMPLOYED UNDER ANOTHER RETIREMENT SYSTEM FOR FEDERAL OR DISTRICT OF COLUMBIA EMPLOYEES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		4. (B) IF "YES," GIVE THE NAME OF THE OTHER RETIREMENT SYSTEM	

(OVER)

3/11/68

INDICATE, BY SIGNING YOUR INITIALS IN THE APPROPRIATE BOX BELOW, THE TYPE OF ANNUITY YOU WANT TO RECEIVE. READ THE EXPLANATIONS AND CONSIDER THE MATTER CAREFULLY. NO CHANGE WILL BE PERMITTED AFTER AN ANNUITY HAS BEEN GRANTED. IF YOU WANT AN ANNUITY WITH A SURVIVOR BENEFIT, BE SURE TO GIVE THE OTHER INFORMATION CALLED FOR.

#### F. TYPES OF ANNUITY: MARRIED APPLICANTS ONLY

##### 1. ☐ INITIALS ANNUITY WITH SURVIVOR BENEFIT TO WIDOW OR WIDOWER

SPECIFY THE PORTION OF YOUR ANNUITY YOU WANT USED AS THE BASE FOR YOUR WIDOW'S (OR WIDOWER'S) SURVIVOR ANNUITY.

If you want all your annuity used as the base for the survivor benefit, write the word "all" in the box below. If you want only part of your annuity used as the base for the survivor benefit, write the yearly amount of your annuity you want used.

*5 All*

THE SURVIVOR'S ANNUITY WILL BE 55% OF ALL OR WHATEVER PORTION OF YOUR ANNUITY YOU SPECIFY AS THE BASE FOR HER (OR HIS) BENEFIT.

• If you are married, you will receive this type of annuity unless you choose the annuity in F. 2.

→ • The annuity payable to you during your lifetime will be reduced by 2½% of any amount up to \$3,600 a year used as the base for the survivor benefit, plus 10% of any amount over \$3,600 so used.

• If you retire for total disability before age 60 and get a guaranteed minimum disability annuity, you may use all or any part of your "earned" annuity as the base for the survivor benefit. You cannot use any extra annuity which may be payable to make up the guaranteed minimum annuity.

• If your wife (or husband) should die before you, no change in type of annuity will be permitted, your annuity will not be increased, nor may you name any other person as survivor.

→ • The survivor's annuity will begin upon your death and end when she (or he) dies or remarries.

##### 2. ☐ INITIALS ANNUITY WITHOUT SURVIVOR BENEFIT

(I do not desire my wife (or husband) to receive a survivor annuity benefit after my death.)

→ • If you choose this type, your wife (or husband) cannot be paid a survivor annuity after your death.

• This type provides annuity payments to you only.

#### G. TYPES OF ANNUITY: UNMARRIED APPLICANTS ONLY (Including Widowed and Divorced)

##### 1. ☐ INITIALS ANNUITY WITHOUT SURVIVOR BENEFIT

• If you are not married, you will receive this type of annuity unless you choose the annuity in G. 2.

• This type provides annuity payments to you only.

##### 2. ☐ INITIALS ANNUITY WITH SURVIVOR BENEFIT TO NAMED PERSON HAVING AN INSURABLE INTEREST

SPECIFY THE NAME, RELATIONSHIP AND DATE OF BIRTH OF THE PERSON YOU WISH TO RECEIVE THE SURVIVOR ANNUITY

NAME OF PERSON (First, middle, last)

RELATIONSHIP

DATE OF BIRTH (Mo., day, yr.)

SEE UNMARRIED EMPLOYEES UNDER INFORMATION REGARDING SURVIVOR ANNUITIES ON THE ATTACHED INFORMATION SHEET FOR EXPLANATION OF REDUCTION IN YOUR ANNUITY.

• This type is available to all retiring *unmarried* employees who are *in good health*.

• It provides a reduced annuity to you and a survivor annuity to the person named as having an insurable interest.

• The survivor's annuity will begin upon your death and end when she (or he) dies.

• The survivor's annuity will be 55% of the reduced annuity you receive.

• If you choose this type, you will have to undergo a medical examination which will be arranged by the Civil Service Commission at no cost to you.

• If the person named as having an insurable interest should die before you, no change in type of annuity will be permitted, your annuity will not be increased, nor may you name any other person as survivor.

#### H. CERTIFICATION OF APPLICANT

**WARNING.**—Any intentional false statement in this application or willful misrepresentation relative thereto is a violation of the law punishable by a fine of not more than \$10,000 or imprisonment of not more than 5 years, or both (18 U.S.C. 1001).

I hereby certify that all statements made in this application are true to the best of my knowledge and belief.

*June 3, 1968*  
(DATE)

*Donald C. Monell*  
(SIGNATURE OF APPLICANT)

#### I. FOR USE OF EMPLOYING AGENCY (See FPM Supplement 831-1 for instructions.)

CHECK APPROPRIATE BOX:

☐

INDIVIDUAL RETIREMENT RECORD, SF 2806, AND REGISTER OF SEPARATIONS AND TRANSFERS, SF 2807, ARE ATTACHED.

☐

INDIVIDUAL RETIREMENT RECORD, SF 2806, WAS SENT TO U.S. CIVIL SERVICE COMMISSION ON \_\_\_\_\_

(DATE)

WITH REGISTER OF SEPARATIONS AND TRANSFERS, SF 2807, NO. \_\_\_\_\_

*Maurice F. Row*  
(SIGNATURE)


*6-3-68*  
(DATE)

*Donald C. Monell*  
(OFFICIAL TITLE)

*Federal Bureau of Investigation*  
(DEPARTMENT OR AGENCY)

**OFFENSES BARRING ANNUITY PAYMENTS:** Public Law 87-299 prohibits payment of annuity to persons who have committed specified offenses involving the national security of the United States. Employing agencies are responsible for submitting all pertinent information to the Civil Service Commission's Bureau of Retirement and Insurance in any case when this law possibly applies.

AGENCY CERTIFICATION OF INSURANCE STATUS  
**Federal Employees' Group Life Insurance Act**

1. FULL NAME OF EMPLOYEE (Last) (First) (Middle) <b>MORRELL, DONALD C.</b>		2. DATE OF BIRTH (MONTH, DAY, YEAR) <b>6-13-18</b>
3. CHECK THE REASON FOR TERMINATING INSURANCE (a) <input type="checkbox"/> SEPARATED (c) <input type="checkbox"/> DIED (b) <input checked="" type="checkbox"/> RETIRED <b>Declined optional insurance.</b> WAS EMPLOYEE AT TIME OF DEATH AN APPLICANT FOR CIVIL SERVICE RETIREMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO (d) <input type="checkbox"/> 12 MONTHS NON-PAY STATUS (e) <input type="checkbox"/> OTHER (Specify)		
4. CHECK APPROPRIATE BOX CONCERNING S. F. 54, DESIGNATION OF BENEFICIARY (a) <input type="checkbox"/> CURRENT S. F. 54 ATTACHED (b) <input checked="" type="checkbox"/> A CURRENT S. F. 54 IS NOT ON FILE WITH THIS AGENCY (c) <input type="checkbox"/> A CURRENT S. F. 54 IS ON FILE IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER (OR EQUIVALENT)		
NOTE: IF EMPLOYEE (A) DIED OR (B) IS RETIRING OR RECEIVING FEDERAL EMPLOYEES' COMPENSATION UNDER CONDITIONS ENTITLING HIM TO RETAIN FREE LIFE INSURANCE, ATTACH CURRENT S. F. 54, IF ANY, TO ORIGINAL S. F. 56 AND CHECK BOX 4 (a) ON ORIGINAL AND ALL COPIES OF S. F. 56; IF NO CURRENT S. F. 54 IS ON FILE, CHECK BOX 4 (b). IN ALL OTHER CASES, SHOW WHETHER OR NOT CURRENT S. F. 54 IS ON FILE BY CHECKING BOX 4 (b) OR (c). A CURRENT S. F. 54 IS ONE THAT HAS NOT BEEN CANCELED BY EMPLOYEE OR AUTOMATICALLY BY TRANSFER OR PRIOR TERMINATION OF INSURANCE.		
5. DATE OF EVENT CHECKED IN ITEM 3 (MONTH, DAY, YEAR) <b>7-3-68</b>	6. ANNUAL COMPENSATION RATE - NOT AMOUNT OF INSURANCE - (CONVERT DAILY, HOURLY, PIECEWORK, ETC. RATE TO ANNUAL RATE) ON DATE IN ITEM 5. <b>\$ 23,079</b> PER ANNUM	7. DATE OF NOTICE OF CONVERSION PRIVILEGE (SF 55) TO EMPLOYEE (MONTH, DAY, YEAR)
8. I CERTIFY THAT THE ABOVE INFORMATION HAS BEEN OBTAINED FROM, AND CORRECTLY REFLECTS OFFICIAL RECORDS, AND THAT THE EMPLOYEE NAMED WAS COVERED BY FEDERAL EMPLOYEES' GROUP LIFE INSURANCE ON THE DATE SHOWN IN ITEM 5. (SIGN ORIGINAL ONLY)		
 (Personal signature of authorized agency official) <b>N. P. Callahan</b> (Type name of authorized agency official) <b>Federal Bureau of Investigation</b> (Name of agency)		<b>7-3-68</b> (Date) <b>Assistant Director</b> (Title) <b>Washington, D. C.</b> (Mailing address, including ZIP code, of agency)

SEE OTHER SIDE  
FOR  
INSTRUCTIONS TO EMPLOYING AGENCY

# INSTRUCTIONS TO EMPLOYING AGENCY

## COMPLETION OF CERTIFICATION

1. This Certification must be completed in triplicate whenever an employee's insurance terminates for:
  - a. Death.
  - b. Retirement on an immediate annuity with 12 or more years' creditable service, of which at least 5 years are civilian service, or on account of disability. (An immediate annuity is one which begins to accrue not later than 1 month after the date the insurance would normally cease.) In a disability retirement case, do not complete S.F. 56 until a finding of disability has been officially made and the employee's separation is in order.
  - c. Completion of 12 months in a non-pay status or separation, and the employee is receiving benefits under the Federal Employees' Compensation Act.
  - d. Any other reason, if the employee desires to convert his group life insurance, except under the following circumstances:
    - (1) Employee waived on S.F. 53;
    - (2) If it is known that, within 3 calendar days after the date the insurance terminated, the employee will return to Government service in the same or another position in which he will be eligible to reacquire Federal Employees' Group Life Insurance;
    - (3) More than 75 days have elapsed from the date insurance terminated unless specific request is made therefor by the Civil Service Commission or the Office of Federal Employees' Group Life Insurance.
2. If insurance terminated on account of death, indicate whether the employee had filed an Application for Retirement (S.F. 2801) with the Civil Service Commission.
3. In item 7, give date of Notice of Conversion Privilege (S.F. 55), except that if this form (S.F. 56) is issued in lieu of S.F. 55, give current date. In case of death, leave this item blank.

## DISPOSITION OF CERTIFICATION

1. Death of employee—
  - a. Send duplicate copy of Certification immediately to the Office of Federal Employees' Group Life Insurance.
  - b. Keep the original (preferably in the Official Personnel Folder or its equivalent) for attachment to a claim for death benefits (Form FE-6) when received.
  - c. If no claim is received, send the original Certification, upon request, to the Office of Federal Employees' Group Life Insurance.
  - d. If the deceased employee has a current designation of beneficiary on file, the designation (S.F. 54) must be attached to the original Certification when it is sent to the Office of Federal Employees' Group Life Insurance.
2. Retirement of employee—
  - a. If the employee is applying for an immediate annuity (with 12 or more years' creditable service, of which at least 5 years are civilian service or for disability), attach the original Certification and current designation of beneficiary, (S.F. 54), if any, to the application for retirement and give duplicate copy of Certification to the employee. [NOTE: In a disability retirement case where the application has already been sent to the Civil Service Commission, attach the original S.F. 56 (and S.F. 54, if any,) to the "FINAL" Individual Retirement Record (S.F. 2806).]
  - b. If the employee prefers to convert his group insurance to an individual policy, give him the original and duplicate copy of the Certification. Retain S.F. 54, if any.
3. Employee in receipt of compensation benefits—
  - a. If the employee is receiving benefits under the FEDERAL EMPLOYEES' COMPENSATION ACT on account of a job incurred disease or injury to himself, have him complete appropriate box on reverse side of the original Certification. Send original Certification and current designation of beneficiary (S.F. 54), if any, to the U. S. CIVIL SERVICE COMMISSION, BUREAU OF RETIREMENT AND INSURANCE, WASHINGTON, D. C. 20415, and give duplicate copy of Certification to the employee.
  - b. If the employee prefers to convert his group insurance to an individual policy, give him the original and duplicate copy of the Certification. Retain S.F. 54, if any.
4. All other cases—

Upon request, give the employee the original and duplicate copy of the Certification or mail them to him.
5. In all cases—

Retain file copy of the Certification in the employee's Official Personnel Folder or its equivalent.

## PROMPT CERTIFICATION REQUIRED

The time in which an employee may convert his group life insurance to an individual policy is limited. This Certification must be completed and delivered or mailed to him promptly.

UNITED STATES CIVIL SERVICE COMMISSION  
BUREAU OF RETIREMENT AND INSURANCE  
WASHINGTON, D. C. 20415  
June 17, 1968

RCH:RJW:prm  
CSA-1-101-856

United States Department of Justice  
Federal Bureau of Investigation  
Washington, D. C. 20535

ATTENTION: Personnel Section  
Room 4513

REQUEST FOR INDIVIDUAL RETIREMENT RECORD (STANDARD FORM 2806)			
NAME (Last) (First) (Middle)		DATE OF BIRTH	SOCIAL SECURITY NO.
MORRELL DONALD CLARK		6-13-18	100-03-8019
OTHER NAMES UNDER WHICH EMPLOYED		POSITION	
		Special Agent	
SERVICE CLAIMED IN CONNECTION WITH AN APPLICATION FOR			
<input checked="" type="checkbox"/> ANNUITY <input type="checkbox"/> DEATH BENEFITS <input type="checkbox"/> REFUND <input type="checkbox"/> DEPOSIT OR REDEPOSIT			
PERIODS OF SERVICE FOR WHICH A 2806 IS REQUESTED			
BEGINNING DATE	ENDING DATE	DEPARTMENT OR AGENCY	LOCATION
	7-3-68	Department of Justice Federal Bureau of Investigation	Washington, D. C.

REMARKS: The Commission has approved the retirement of Donald Clark Morrell under Section 8336 (c), Title 5 USC. Please forward the claimant's retirement record card (Form 2806) as soon as possible after date of final separation.

Please attach this form to the 2806 forwarded. If Form 2806 is not submitted, please check one of the boxes on the reverse side of this form and furnish information as required.

Rec'd 6-18-68 R.P. eff. 7-3-68,  
See action letter 6-24-68,  
Security to commence 7-4-68.

107-2011-1155-100  
2 JUL 22 1968/40

Jack Goldberg  
Chief, Claims Division

United States Civil Service Commission  
Bureau of Retirement and Insurance  
Claims Division  
Washington, D.C. 20415

The requested information is furnished below as indicated by checked box:

- ☐ Form 2806 covering service claimed forwarded to the Civil Service Commission.

DATE FORM 2806 FORWARDED	REGISTER OF SEPARATIONS NO.
NAME AND DATE OF BIRTH SHOWN ON FORM 2806	

- ☐ No record of employment in this department or agency.
- ☐ Form 2806 cannot be forwarded. Employee on furlough until  
\_\_\_\_\_  
(DATE)
- ☐ Employee not subject to the Civil Service Retirement System:

FROM	TO
REASON FOR SEPARATION	

Remarks

89 JUN 11 11 40 AM '88  
81  
REC'D. CIVIL DIV.

\_\_\_\_\_  
(AUTHORIZED CERTIFYING OFFICER)

\_\_\_\_\_  
(DATE)

\_\_\_\_\_  
(TITLE)



0

MORRELL DONALD C					100-03-8019
MONTH	TOT OT	AVG OT	OFF	AVG	DAYS WORKED
JANUARY	45.16	2.09	2.21	D8	21
FEBRUARY	28.50	2.24	2.22	D8	12
MARCH	42.20	2.07	2.12	D8	20
APRIL	47.14	2.22	2.17	D8	20
MAY	44.56	2.03	2.16	D8	22
JUNE	32.53	2.03	2.19	D8	16
JULY			2.18	D8	
TOTAL 1968	241.29	2.11			111

147-1101 RECORDED  
2 JUL 28 1968 20

File 3  
616

August 26, 1968

b6  
b7c

[Redacted]  
Summit, New Jersey 07901

Dear [Redacted]

In connection with my letter of May 9, 1968, I wish to advise of the following changes to be made in the 1969 Edition of the law directory.

The name of Mr. Donald C. Morrell should be deleted in view of his retirement from this Bureau. His forwarding address is Post Office Box 721, Ocean Drive Beach, South Carolina 29582.

REC-151 101-421043-200

In addition, Mr. Joseph A. Sullivan has been transferred to our New York Office. His address is c/o Federal Bureau of Investigation, 201 East 69th Street, New York, New York 10021.

Sincerely yours,

J. Edgar Hoover

John Edgar Hoover  
Director

MAILED 4

AUG 26 1968

COMM-FBI

olson \_\_\_\_\_  
eLoach \_\_\_\_\_  
ohr \_\_\_\_\_  
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RKW:klb  
(3)

XEROX  
AUG 29 1968

MAIL ROOM ☐ TELETYPE UNIT ☐

Post Office Box 721  
Ocean Drive Beach  
South Carolina 29532  
August 19, 1969

Mr. Tolson \_\_\_\_\_  
Mr. DeLoach \_\_\_\_\_  
Mr. Mohr \_\_\_\_\_  
Mr. Bishop \_\_\_\_\_  
Mr. Casper \_\_\_\_\_  
Mr. Callahan \_\_\_\_\_  
Mr. Conrad \_\_\_\_\_  
Mr. Felt \_\_\_\_\_  
Mr. Gale \_\_\_\_\_  
Mr. Rosen \_\_\_\_\_  
Mr. Sullivan \_\_\_\_\_  
Mr. Tavel \_\_\_\_\_  
Mr. Trotter \_\_\_\_\_  
Tele. Room \_\_\_\_\_  
Miss Holmes \_\_\_\_\_  
Miss Gandy \_\_\_\_\_

Honorable John Edgar Hoover  
Director  
Federal Bureau of Investigation  
Washington, D. C. 20535

Dear Mr. Hoover:

Last week, just after Special Agent Joseph I. Cavanaugh passed on, Messrs. N. P. Callahan and James B. Adams, knowing of our long association with Mr. Cavanaugh and our great fondness for him, made strenuous efforts to locate former Special Agent C. Ray Davidson and me to advise us of Mr. Cavanaugh's death. Mr. Davidson was staying at my house in South Carolina and I happened to be in Washington at the time. As a result of their efforts we were both informed and were able to communicate our sympathy to Mrs. Cavanaugh and the family.

It is gestures such as this that speak so eloquently of the unity and spirit of the Bureau. I know I was deeply moved to realize that our former associates would take so much time and effort to think of us at a time like this, and Mr. Davidson has told me he felt similarly because Mr. Cavanaugh meant so very much to both of us.

I want to thank you and Mr. Callahan and Mr. Adams for the thoughtfulness so typical of the many fine people who make up the FBI.

Sincerely yours

Donald C. Correll

REC-134

67-421042-201

SEP 3 1969

12 SEP 2 1969

PERS. REC. UNIT

EXP. PROC.

AUG 25 1969

ack  
8-28-69  
ALC/enc

33

201-2

Special Agent

11